Entered 02/23/18 09:35:19 Desc Main Case 18-80343 Doc 1 Filed 02/23/18 Page 1 of 64 Document UNITED STATES BANKRUPTCY COURT Fill in this information to identify your case: NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: FEB 23 2018 Northern District of Illinuis Case number (if known): Chapter you are filing under: JEFFREY P. ALLSTEADT, CLERK Chapter 7 INTAKE 2 Chapter 11 ☐ Chapter 12 ☐ Check if this is an ☐ Chapter 13 amended filing Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

£.ti	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
our full name		
rite the name that is on your overnment-issued picture	Sandra	First name
our driver's license or assport).	Ann Middle name	rifst name Middle name
ing your picture	Castillo Last name	Last name
th the trustee.		and little
	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
l other names you ve used in the last 8		
ars	rist name	First name
lude your married or iiden names.	Middle name	Middle name
	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
	<u> </u>	xxx - xx
nder of federal Ividual Taypayor	OR .	OR
ntification number N)	9 xx - xx	9 xx - xx
	overnment-issued picture entification (for example, our driver's license or issport). Ing your picture entification to your meeting the the trustee. I other names you we used in the last 8 ars lude your married or iden names. If the last 4 digits of its Social Security inber or federal ividual Taxpayer intification number	pour full name rite the name that is on your overnment-issued picture entification (for example, ur driver's license or ssport). Support in the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III)

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Debtor 1

Sand	ica A	nη	Cas	tillo
First Name	Middle Name		Last Name	

Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Number (EIN) you have used it		I have not used any business names or EINs.
the last 8 years	Business name	Business name
Include trade names and doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
5. Where you live		If Debtor 2 lives at a different address:
	Number Street	Number Street
	Sterling II 6/08/ State ZIP Code	City State ZIP Code
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
. Why you are choosing	Check one:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	Thave another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1

Sandi	g Ann	Castillo
First Name	Middle Name	t ast Name

Case number (if known)_

	Part 2: Tell the Court Abo	out Your	Bankru	ptcy Case					
7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
1	are choosing to file under		Chapter 7						
		☐ Cha	apter 11						
		Cha	apter 12						
	Friedrikum 1 1826 - Albindina kanya 2 maren aliku a kyapatuzza (hizi 2 1890 ali 11 alikuwa a 1828).	☐ Cha	apter 13	35 John St. 1985					
8. How you will pay the fee		loca you sub	al court f rself, yo mitting y	for more detail ou may pay wit	ls about how ye h cash, cashie on your behalf	ou i	may pay. Typica check, or mone	heck with the clerk's office in your ally, if you are paying the fee y order. If your attorney is y pay with a credit card or check	
		☐ I ne App	ed to pa	ay the fee in i for Individuals	nstallments. I to Pay The Fi	f yo ling	ou choose this o Fee in Installm	ption, sign and attach the ents (Official Form 103A).	
		less pay	aw, a jud than 15 the fee	age may, but i 50% of the offic in installments	is not required cial poverty line s). If you choos	to, e th e tl	waive your fee, lat applies to yo his option, you n	otion only if you are filing for Chapter 7. and may do so only if your income is ur family size and you are unable to nust fill out the <i>Application to Have the</i> twith your petition.	
9.	Have you filed for bankruptcy within the	No No		Fig. 1. Sec. A.					
	last 8 years?	☐ Yes.	District		W	nen	MM / DD / YYYY	Case number	
			District					Case number	
			District						
			District		W	en	MM / DD / YYYY	Case number	
10.	Are any bankruptcy	☑ No		APPARENTAL MANAGEMENT OF THE PROPERTY OF THE ASSESSMENT OF THE PARENTY OF THE PAR					
	cases pending or being filed by a spouse who is	Yes.	Debtor		t			_ Relationship to you	
	not filing this case with you, or by a business partner, or by an affiliate?		District _		Wn	en	MM/DD/YYYY	Case number, if known	
	annia de l		Debtor					Relationship to you	
								Case number, if known	
						•••••	MM / DD / YYYY		
	Do you rent your residence?			r landlord obtair	ned an eviction ju	ıdgı	ment against you?	,	
			☐ Yes.	Go to line 12. Fill out <i>Initial St</i> of this bankrupto	atement About a	an E	Eviction Judgment	Against You (Form 101A) and file it as	

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Debtor	1	

Sand	m A	:Nn	C_{α}	State	7
	4 1 1	11011		<u>~~</u> !!!!	,
First Name	Mindle Man	10	Last Name		

Case number	(if known)		

and the state of t		ses You Own as a So			
2. Are you a sole proprietor of any full- or part-time	No.	Go to Part 4.			
business? A sole proprietorship is a	Yes	. Name and location of bu	siness		
business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or		Name of business, if any Number Street			
LLC. If you have more than one sole proprietorship, use a		- Offeet			
separate sheet and attach it to this petition.		City		State	ZIP Code
		Check the appropriate bo	ox to describe your busines	s:	
			s (as defined in 11 U.S.C. §		
		_	tate (as defined in 11 U.S.		•
		☐ Stockbroker (as define	ed in 11 U.S.C. § 101(53A)))	
		Commodity Broker (as	s defined in 11 U.S.C. § 10	1(6))	
		☐ None of the above			
business debtor, see 11 U.S.C. § 101(51D).	Yes.	the Bankruptcy Code.			or according to the definition in property or according to the definition in the
art 4: Report if You Own o	or Have .	Any Hazardous Prope	rty or Any Property Th	at Needs li	mmediate Attention
	☑ No				
property that poses or is alleged to pose a threat of imminent and	₩No	What is the hazard?			
property that poses or is alleged to pose a threat	₩No	What is the hazard? _			
property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?	₩No	-	needed, why is it needed?		
property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock	₩No	-	needed, why is it needed?		
property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building	₩No	If immediate attention is r Where is the property?	needed, why is it needed?		
alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building	₩No	If immediate attention is r Where is the property?			

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Debtor	1	

Sandra Ann Castillo

Case number (if known)____

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. **About Debtor 1:**

You must check one:

☑ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Dehto	۱r	

Sand	ra Ai	nn Castillo	
First Name	Middle Name	i set Nama	

Case number (if known)___

P	art 6: Answer These Que	estions for Reporting Purpos	es			
16	. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
	,	☐ No. Go to line 16b. ☐ Yes. Go to line 17.				
		16b. Are your debts primari money for a business or inv	ily business debts? Business of vestment or through the operation of	lebts are debts that you incurred to obtain fithe business or investment.		
		☐ No. Go to line 16c. ☐ Yes. Go to line 17.				
		16c. State the type of debts you	owe that are not consumer debts o	r business debts.		
17.	Are you filing under Chapter 7?	☐ No. I am not filing under Chi				
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	No	er 7. Do you estimate that after any s are paid that funds will be availabl	exempt property is excluded and et a constraint et a distribute to unsecured creditors?		
18.	How many creditors do you estimate that you owe?	1-49 50-99 100-199 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000		
19.	How much do you estimate your assets to be worth?	S0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	□ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
	How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
Pa	rt 7: Sign Below					
Fo	ryou	I have examined this petition, and correct.	I declare under penalty of perjury t	hat the information provided is true and		
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
,		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
		* Sandra a.	Castille *			
		Signature of Debtor 1	Signal	ture of Debtor 2		
lar 200 says	See Shored 1 of all transmissions and the second	Executed on Alo	U18 Execu	ted on MM / DD / YYYY		

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•	Document	age 1 of 04	
Debtor 1 Sandra First Name Middle Nam	Ann Castillo	Case number (if known	n)
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in the to proceed under Chapter 7, 11, 12, or 13 available under each chapter for which the	of title 11, United States Code, a person is eligible. I also certify	and have explained the relief y that I have delivered to the debtor(s)
If you are not represented by an attorney, you do not need to file this page.	the notice required by 11 U.S.C. § 342(b) a knowledge after an inquiry that the information	and, in a case in which § 707(b) tion in the schedules filed with t)(4)(D) applies, certify that I have no the petition is incorrect.
	Signature of Attorney for Debtor		MM / DĐ /YYYY
	Printed name		
	Firm name		
	Number Street		554 d

State

State

Email address

ZIP Code

City

Contact phone

Bar number

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Debtor	1	

San	lra	Ann	Cas	stillo
First Name	Middle Name	last	Name	

Case number (if known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?	
□ No	
☑ Yes	
Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned? No Yes	
Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy form: No	s?
Yes. Name of Person	
Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

, ,	Landra a Castilla *	
	Signature of Debtor 1	Signature of Debtor 2
	Date 1/26/2018	Date MM / DD / YYYY
: : :	Contact phone (815) (631-2158	Contact phone
	Cell phone (815) 631-2658	Cell phone
	Email address SCASTLD 210 Yahoo. Com	Email address

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

In Re:)	
)	
	Debtor (s)	SandraAnn	Castill)	Case No.
		•)	Chapter *
)	

List of Creditors

Capitol One P.O. Box 30281 San Lake City UT 84130	COMED POBOX WIII Carolstream II 60197
Crédit First NA P.O. BOX 81315 Cleveland OH 44181	Rocktord Spine Center PO BOX 4533 Carol Stream II 60197
One Main Financial 4311 E Lincolnway Sterling II 61081	ROCKFORD Health phisicians 16785 Weaver Rd SuiteD ROCKford II 161114
Sterling II 61081	HER ACCOUNTS 5320 22nd Avenue Moline IL 61266
Select Employee Credit Unio PO Box 636 Sterling II 61081	n CGH medical Center POBOX 739 Moline II 61265

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Debtor 1

Sandra Ann Castillo

Carly Wiley Process	
Sauk Valley Physical Therage 4204 ELincolnway Ave Suited Sterling II 61081	
Midwest Dental 415 locust Street Suite A	
Sterling II 61081	
Mercynealth Department 41035 Carul Stream II 60122	

Fill in this in	nformation to ident	ify your case:		
Debtor 1	Sandra	Ann Middle Name	Casti	Jo
Debtor 2 (Spouse, if filing)	First Name	. Middle Nams	Last Name	·
United States	Bankruptcy Court for th	e: Northern District of Illi	nois	
Case number	(If known)		·	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1	Summarize Your Assets	
		Your assets Value of what you own
	edule A/B; Property (Official Form 106A/B)	. (7)
1a.	Copy line 55, Total real estate, from Schedule A/B	\$ <u> </u>
1b.	Copy line 62, Total personal property, from Schedule A/B	\$7,900
1c. (Copy line 63, Total of all property on Schedule A/B	<u>\$7,900</u>
Part 2	Summarize Your Liabilities	-
**************************************		Your liabilities Amount you owe
ľ	edule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	sO
<i>?</i> ,	edule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$
3b. (Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ : 32, 153
,	Your total liabilities	<u>\$32.153</u>
Part 3	Summarize Your Income and Expenses	
4 Sche	edule I: Your Income (Official Form 106I)	101
Copy	y your combined monthly income from line 12 of Schedule I	s Lalle
	edule J. Your Expenses (Official Form 106J)	
	y your monthly expenses from line 22c of Schedule J	s \ \80

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Debior 1

San	เล	Ann	Coistil	10
irst Name	Middle Name	Last Name		

Case number (if known)

F	art 4: Answer These Questions for Administrative and Statistical Records
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes
7.	What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F. Total claim
	From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$
	9d. Student loans. (Copy line 6f.)
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$
-	9g. Total. Add lines 9a through 9f.

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Fill in this information to identify your case and th	is filing:		
c odm Ann	Cactino		
Debtor 1 First Name Middle Name	Last Name		
Debtor 2		•	
(Spouse, if filing) First Name Middle Name	Last Name	·	
United States Bankruptcy Court for the: Northern District of	fillinois		
Case number		• •	
	- Subministration of the Control of	☐ Check if this is	
		amended filing	g
Official Form 106A/B		· .	
And the second s			
Schedule A/B: Propert	t y	12/1	15
In each category, separately list and describe iten category where you think it fits best. Be as comp responsible for supplying correct information. If n write your name and case number (If known). Ans	lete and accurate as possible. If two married people nore space is needed, attach a separate sheet to the wer every question.	e are filing together, both are equally is form. On the top of any additional pa	
Part 1: Describe Each Residence, Building	, Land, or Other Real Estate You Own or Ha	/e an Interest In	
1. Do you own or have any legal or equitable inter-	est in any residence, building, land, or similar prop	erty?	
No. Go to Part 2.			
Yes. Where is the property?			
	What is the property? Check all that apply.	Do not deduct secured claims or exemptions.	
	☐ Single-family home	the amount of any secured claims on Schedul Creditors Who Have Claims Secured by Prope	
1.1. Street address, if available, or other description	Duplex or multi-unit building		· :
•	☐ Condominium or cooperative ☐ Manufactured or mobile home	Current value of the Current value of entire property? portion you own	
are control to an Athentical of Physical Activity of Physical Activity of the	- Q Land	e e	•••
•	☐ Investment property	Ψ Ψ	
City Chair 719 Cada	- Timeshare	Describe the nature of your ownership	p
City State ZIP Code	Other	interest (such as fee simple, tenancy I the entireties, or a life estate), if know	by m.
	Who has an interest in the property? Check one.	are character, or a me country, it move	•••
	Debtor 1 only		
County	Debtor 2 only	_	
	Debtor 1 and Debtor 2 only	☐ Check if this is community propert	ty
	At least one of the debtors and another	(see instructions)	
	Other information you wish to add about this it	em, such as local	
	property identification number:		
If you own or have more than one, list here:		entre de la compansión de	
·	What is the property? Check all that apply.	Do not deduct secured claims or exemptions.	
1.2.	Single-family home Duplex or multi-unit building	the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Prope	
Street address, if available, or other description	Condominium or cooperative	Commence of the Commence of th	arente Balla
· · · ·	Manufactured or mobile home	Current value of the Current value of entire property? portion you own	
•	☐ Land	s s	
•	☐ Investment property		
City State ZIP Code	☐ Timeshare	Describe the nature of your ownership interest (such as fee simple, tenancy be))\/
· · · · · · · · · · · · · · · · · · ·	Other	the entireties, or a life estate), if known	
	Who has an interest in the property? Check one.		
	Debtor 1 only		
County	Debtor 2 only		
•	Debtor 1 and Debtor 2 only	Check if this is community property	y
	At least one of the debtors and another	(see instructions)	
	Other information you wish to add about this ite property identification number:	n, such as local	1

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1.3	3.	What is the property? Check all that apply. Single-family home	the amount of any secur	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
	Street address, if available, or other description	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	
	City State ZIP Code	Land Investment property Timeshare Other	Describe the nature interest (such as fee the entireties, or a li	simple, tenancy by
	County	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this its property identification number:	Check if this is co (see instructions) em, such as local	ommunity property
		all of your entries from Part 1, including any entrie		\$
9art 2				
Do you you owr 3. Cars	own, lease, or have legal or equitable interest that someone else drives. If you lease a vehicle, vans, trucks, tractors, sport utility vehicles	est in any vehicles, whether they are registered or sele, also report it on <i>Schedule G: Executory Contracts</i> so, motorcycles	not? Include any vehicles and Unexpired Leases.	5
Do you you owr B. Cars	own, lease, or have legal or equitable interest that someone else drives. If you lease a vehicle, vans, trucks, tractors, sport utility vehicles	ele, also report it on Schedule G. Executory Contracts	not? include any vehicle: and Unexpired Leases.	5
Do you you owr 3. Cars	own, lease, or have legal or equitable interest that someone else drives. If you lease a vehicle, vans, trucks, tractors, sport utility vehicles	who has an interest in the property? Check one.	and Unexpired Leases. Do not deduct secured clathe amount of any secure. Creditors Who Have Clain	ims or exemptions. Put I claims on Schedule D: Is Secured by Property.
Do you you owr B. Cars	own, lease, or have legal or equitable interest that someone else drives. If you lease a vehicle of the someone else drives, if you lease a vehicle of the someone else drives. If you lease a vehicle of the someone else drives, sport utility vehicle of the someone else drives. Make: Model: Year: Approximate mileage:	tile, also report it on Schedule G: Executory Contracts s, motorcycles Who has an interest in the property? Check one.	and Unexpired Leases. Do not deduct secured clathe amount of any secure.	ims or exemptions. Put I claims on Schedule D: Is Secured by Property.
Do you you owr B. Cars	own, lease, or have legal or equitable interest that someone else drives. If you lease a vehicle, vans, trucks, tractors, sport utility vehicles to ves Make: Model: Year:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	ims or exemptions. Put defines on Schedule Downs Secured by Property. Current value of the
Do you owr	own, lease, or have legal or equitable interest that someone else drives. If you lease a vehicle of the someone else drives, if you lease a vehicle of the someone else drives. If you lease a vehicle of the someone else drives, sport utility vehicle of the someone else drives. Make: Model: Year: Approximate mileage:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	ims or exemptions. Put of claims on Schedule D: as Secured by Property. Current value of the portion you own?
Do you owr	own, lease, or have legal or equitable interest that someone else drives. If you lease a vehicle s, vans, trucks, tractors, sport utility vehicles to compare the solution of	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property? \$ Do not deduct secured claithe amount of any secured the amount of any secur	ims or exemptions. Put it claims on Schedule D: as Secured by Property. Current value of the portion you own? \$
Do you owr 3. Cars 1. Y 3.1.	own, lease, or have legal or equitable interest that someone else drives. If you lease a vehicle of the someone else drives, if you lease a vehicle of the someone else drives. If you lease a vehicle of the someone else drives, sport utility vehicle of the someone else drives. Make: Model: Year: Approximate mileage: Other information:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property? \$	ims or exemptions. Put if claims on Schedule D: as Secured by Property. Current value of the portion you own? \$ ms or exemptions. Put claims on Schedule D:

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3,3,	Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured da the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D:
	Approximate mileage:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
•	Other information:	☐ Check if this is community property (see instructions)	\$	\$
3.4.	Make:	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D:
	Year: Approximate mileage:	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property?	hamita a sa
•	Other information:	Check if this is community property (see instructions)	\$	\$
	<i>nples:</i> Boats, trailers, motors, personal water lo	ther recreational vehicles, other vehicles, and acces craft, fishing vessels, snowmobiles, motorcycle accesso		
Exan	nples: Boats, trailers, motors, personal water lo 'es	who has an interest in the property? Check one.		d claims on Schedule D:
Exam	nples: Boats, trailers, motors, personal water lo 'es Make:	craft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one.	nies Do not deduct secured cla	I claims on Schedule D: is Secured by Property.
Exam	mples: Boats, trailers, motors, personal water lo res Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any securer Creditors Who Have Clain	f claims on Schedule D: ns Secured by Property. Current value of the
Exam N N N Y 4.1.	mples: Boats, trailers, motors, personal water lo res Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured cla the amount of any securer Creditors Who Have Clain	f claims on Schedule D: is Secured by Property. Current value of the
Exam N N N Y 4.1.	Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla the amount of any securer Creditors Who Have Clain	d claims on Schedule D: is Secured by Property. Current value of the portion you own? \$ ims or exemptions. Put I claims on Schedule D:
Exam N N 4.1.	Make: Other information: Own or have more than one, list here: Make:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured cla the amount of any securer Creditors Who Have Clain Current value of the entire property? \$ Do not deduct secured cla the amount of any secured	d claims on Schedule D: is Secured by Property. Current value of the portion you own? \$ ims or exemptions. Put I claims on Schedule D:
Exam N N 4.1.	Make: Model: Year: Own or have more than one, list here: Make: Model: Year: Make: Model: Year: Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured clathe amount of any securec Creditors Who Have Claim Current value of the	I claims on Schedule D: is Secured by Property. Current value of the portion you own? \$ ims or exemptions. Put I claims on Schedule D: is Secured by Property. Current value of the

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Debtor 1 Sanara	Ann Castillo	Case number (if known)	
First Name Middle Name	Lest Name		
Rart 3: Describe Your Persona	al and Household Items	•	
			Current value of the
Do you own or have any legal or equ	ultable interest in any of the following items?		portion you own? Do not deduct secured claims
			or exemptions.
 Household goods and furnishing Examples: Major appliances, furnitu 			
No Samples via joi applicances, tarring		i - Pot cocors	
Yes. Describe	ng roum furniture, 5.	tove. Retrialgator.	[<u>5,000</u>
7. Electronics			
collections; electronic de	audio, video, stereo, and digital equipment; compt evices including cell phones, cameras, media play	uters, printers, scanners; music vers, games	_
Yes. Describe	CEN Phone		7.900
a T	VS		
8. Collectibles of value		•	
Examples: Antiques and figurines; stamp, coin, or baseball	paintings, prints, or other artwork; books, pictures, i card collections; other collections, memorabilia, c	or other art objects; collectibles	
Yes. Describe			\$
9. Equipment for sports and hobble		i tables and clubs skiet cances	
Examples: Sports, photographic, ex and kayaks; carpentry to	xercise, and other hobby equipment; bicycles, poo ools; musical instruments	it indies, guit claus, sas, cariocs	
No -			· ·
Yes. Describe			\$
· · ·			
10. Firearms Examples: Pistols, rifles, shotguns,	ammunition, and related equipment		
Yes, Describe			\$
11. Clothes			
Examples: Everyday clothes, furs, F	eather coats, designer wear, shoes, accessories		7 ~ ~ ~ ~
Pres, DescribeEVET	Agent Clothisz dug zhos	\$\$:	\$ <u>a,000</u>
,			3
12, Jewelry			
gold, silver	me jewełry, engagement rings, wedding rings, hei	rloom jewelry, watches, gems,	
No Q Yes. Describe			s
L			
13. Non-farm animals	_		
Examples: Dogs, cats, birds, horses	3		
Yes. Describe			\$
Lancate			
	ld items you did not aiready list, including any	health aids you did not list	
No No			7
Yes. Give specific information.] \$
•	r entries from Part 3, including any entries for	pages you have attached	1.7.900 j

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COSTILO Case number (# Imoun)

	ur Financial Assets	7 - 2 - 2 - 2 - 2				Company to the of the
Do you own or have any	legal or equitable interest in	any of the follow	ving?			Current value of the portion you own?
, f Talente, en						Do not deduct secured claims or exemptions.
			in the second			
16. Cash Examples: Money you	have in your wallet, in your ho	me, in a safe depo	osit box, and on ha	and when you	file your petition	•
☑ No					•	
	·				Cash:	• ()
I beld reconstructed the conversation to					Odali,	
						•
17. Deposits of money Examples: Checking, s and other si	avings, or other financial acco imilar institutions. If you have r	unts; certificates c nultiple accounts v	of deposit; shares i with the same insti	in credit unions itution, list eac	s, brokerage house h.	s,
No.	•					
☐ Yes		Institution name	4			
	17.1. Checking account:					- \$ <u> </u>
	17.z. Checking account:					- \$ <u> </u>
	17.3. Savings account		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			- \$ <u> </u>
·	17.4. Savings account:					- s <i>O</i>
	17.5. Certificates of deposit:					s 0
	·					
•	17.6. Other financial account					- \$ <u>C</u>
	17.7. Other financial account:		***************************************			- \$ <u>U</u>
	17.8. Other financial account				1-444	- \$ <u>U</u>
•	17.9. Other financial account:					- \$ <u> </u>
•						
•						
	or publicly traded stocks					
	investment accounts with brok	erage firms, mone	ey market account	s		
Q No □ ∨os			•			
☐ Yes	Institution or issuer name:					~ ·
•						_ \$
						- \$ <u>.</u>
	•	······································				- \$ <u>· U</u>
			•	,		
a. Non-publicly traded st an LLC, partnership, a	tock and Interests in incorpo	rated and uninco	orporated busine	sses, includir	ng an interest in	
☑ No	Name of entity:				% of ownership:	
Yes. Give specific	or oner.				0% _%	• 0
information about them	***************************************				0% %	• 0
H 16111	4W44-44-114-11	······································			0% %	s ()
				·····	***	Ψ
	•	•				

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<- \	λ.	(actina.				
Debtor 1	Middle Name	Last Name	-USTINU_	Case nu	mber (if known)		
		- Area Salah					
20. Government and corpo	-t- hands and off	or negotiable	and non-negotiable	e instruments			
atti_li_inabanantai	haluda nemanal che	cke rashiers' d	hecks, promišsory n	otes, and money	orders.		
Non-negotiable instrume	ents are those you ca	innot transfer to	someone by signing	g or delivering the	ım.		
☑ No	•					,	
Yes. Give specific	Issuer name:			•			
information about them		•				_ \$	
U:6111						- \$ <u>\</u>	
•						_ s	
•	•						
21. Retirement or pension	accounts					iana	
Examples: Interests in II	RA, ERISA, Keogh,	101(k), 403(b),	thrift savings accoun	ts, or other pension	on or promesnamy pr	(21)3	
☑ No				•			•
Yes. List each account separately.	Type of account:	Institution na	me:				
	•					\$ <u>D</u>	
	401(k) or similar plan				-	$_{\mathbf{s}}$:
	Pension plan:						•
	IRA:						
	Retirement account:					— \$ 	
•	Keogh:			·		_ \$	
	Additional account					\$	
•	Additional account:	•				s <u></u>	
•			•				
							
22. Security deposits and Your share of all unused	d deposits you have	made so that y	ou may continue ser	vice or use from a	ı company		
Examples: Agreements	with landlords, prep	aid rent, public	utilities (electric, gas	, water), telecomn	nunications		
companies, or others				•		•	
₩ No		,		•			
☐ Yes		nstitution name	or individual:		,	. 0	
	Electric: _					- \$ <u> </u>	
	Gas: _					— ş <u> </u>	
	Heating oil:					- \$ <u> </u>	
•	Security deposit on r	ental unit:			71	- \$ <u> </u>	
•	Prepaid rent _					- s <u> </u>	
	Telephone:		·	•		- \$ <u> </u>	
	Water:					— s <u> </u>	·····
	Rented furniture:					- \$ <u> </u>	
· ·	Other:					\$ <u> </u>	
•							
23. Annuities (A contract for	or a periodic paymen	it of money to y	ou, either for life or f	or a number of ye	ars)	•	
No No	•		•				
☐ Yes	Issuer name and d	escription:				~	

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24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.Ş.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No No ☐ Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit. ☑ No Yes. Give specific information about them. 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No No Yes. Give specific information about them.... 27. Licenses, franchises, and other general Intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No No ☐ Yes. Give specific information Federal: about them, including whether you already filed the returns State: and the tax years. i ocai: Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No. ☐ Yes. Give specific information. Alimony: Maintenance: Support Divorce settlement Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No No Yes. Give specific information......

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~ 1	1 1	II
	1	

Castillo

Case number (# known)_

	and the second state of the second se	سيكافي ومشرف فسنس والمستشفسة والاشتيان والاستفادها المتمارة والمتاوية المتمادات المراد والميناس وال		
31	Interests in insurance policies Examples: Health, disability, or life insuran	ce; health savings account (F	SA); credit, homeowner's, or renter's insu	rance .
	☑ No	•		
	☐ Yes. Name the insurance company	Company name:	Beneficiary:	Surrender or refund value:
	of each policy and list its value	Company name.	251,511-1-3	\bigcirc
				\$
				\$ <u></u>
	<i>:</i>	,	·	\$ <u> </u>
			.9	
32	Any interest in property that is due you if you are the beneficiary of a living trust, e property because someone has died.	from someone who has die xpect proceeds from a life ins	a urance policy, or are currently entitled to r	receive
	☐ Yes. Give specific information			
				\$
33	Claims against third parties, whether or Examples: Accidents, employment dispute No	not you have filed a lawsul s, insurance claims, or rights	t or made a demand for payment to sue	
	res. Describe caerr danti			\$
34	Other contingent and unliquidated clain to set off claims	ns of every nature, including	counterclaims of the debtor and right	s
	No .			
	Yes, Describe each claim.	•		\$
				•
			•	
35	Any financial assets you did not already	list	•	
	No I			
	☐ Yes. Give specific information		-	ls (
				, , , , , , , , , , , , , , , , , , , ,
	. Add the dollar value of all of your entrie	from Dart A including am	ontrine for names you have attached	-1 Ons
36	for Part 4. Write that number here	s from Part 4, including any	elities for pages you have attached	→ s. 1, 900
	TOTAL THE PERIOD STATE STATE OF THE PERIOD STA	-		
	ه مستقدرهما مناجعها من فقاله مداحه مد برمانا الوجيدين ما بين النقط مدا (1) (مراجعا (1) منا مرد (1) مناد (السند السند المد	المقاعدة والمستوية والمستوية والمستويدة والمستويدة والمستويدة والمستويدة والمستوية والمستوية والمستويدة والمست	The section of the se	اده استفاده در المساول و المساول و المساول المواقع المواقع المواقع المواقع المواقع المواقع المواقع المواقع الم المواقع المواقع المواقع والمواقع المواقع
P	Describe Any Business-	Related Property You	Own or Have an Interest In. L	ist any real estate in Part 1.
37	Do you own or have any legal or equital	ole interest in any business	related property?	•
٠,	No. Go to Part 6.			
	Yes. Go to line 38.		•	
	ear yes. Ob to mic od.			Current value of the
	•	•		portion you own?
•	,	•		Do not deduct secured claims
	•	•		or exemptions.
38	Accounts receivable or commissions yo	ou aiready earned	•	
٠	No "	· · · · · · · · · · · · · · · · · · ·		***
	Yes. Describe			<u> 5</u>
_	Office and the state of the sta	olion .		
39	Office equipment, furnishings, and supplements Business-related computers, software No	ones e, modems, printers, copiers, fax r	nachines, rugs, telephones, desks, chairs, elect	ronic devices
	Q Yes. Describe			
	um 165, Describe			
	Essential Annual			

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. Debtor 1 Sand	Case number (# known)	
First Name	Middle Name Last Name	
	ulpment, supplies you use in business, and tools of your trade	Topical in the control of the contro
No Yes, Describe		Ţ ()
41. Inventory		
No Yes. Describe	·	s O
· L		
42.Interests in partnership	s or joint ventures	-
[] 'v	Name of entity: % of ownership:	
٠.	%	\$
	%	\$
	lists, or other compilations	i de de la constitución de la co
No Q Yes. Do your lists in	nclude personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	ran, pompi
□ No		7
Yes. Descri	De	s
	roperty you did not already list	
☑ No ☐ Yes. Give specific		
information		\$
· · · · · · · · · · · · · · · · · · ·		. \$
_		\$
		\$ 0
45. Add the dollar value of	all of your entries from Part 5, including any entries for pages you have attached	
	mber here	
	r Farm- and Commercial Fishing-Related Property You Own or Have an Interest In ave an interest in farmland, list it in Part 1.	* september experience
46. Do you own or have any	legal or equitable interest in any farm- or commercial fishing-related property?	and the same
No. Go to Part 7. Yes. Go to line 47.		ab . Loga, of Jones
		Current value of the
		portion you own? Do not deduct secured claims
47. Farm animals	Mary Forces and rest	or exemptions.
Examples: Livestock, pou	HILTY, TAITTH-FAISED TIST	· ·
☐ Yes		
ļ.		is $oldsymbol{C}$. $oldsymbol{1}$

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Debtor 1 Sandra Ann Castillo Case number (# known)	
First Name Middle Name Last Name	ų f
48. Crops—either growing or harvested	t de la companya de l
☑ No ☐ Yes. Give specific information	\$ <u>.</u> C
49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	BL/PRINTEN - VIII
☑ No .	y a popular in the control of the co
☐ Yes	<u> </u>
50. Farm, and fishing supplies, chemicals, and feed	L-Linney.
⊠ No .	
Yes	s D
51. Any farm- and commercial fishing-related property you did not already list	. Actions
ਈ No	
Yes. Give specific information	\$
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	s
for Part 6. Write that number here	
Part 74 Describe All Property You Own or Have an Interest in That You Did Not List Al	oove .
	(
53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership	of the state of th
No .	\$ Q
Yes. Give specific information	\$ 0
	\$
54. Add the dollar value of all of your entries from Part 7. Write that number here	→ [\$]
Part 8: List the Totals of Each Part of this Form	
55. Part 1: Total real estate, line 2	→ \$
56. Part 2: Total vehicles, line 5	as a visual del
57. Part 3: Total personal and household items, line 15	
58. Part 4: Total financial assets, line 36 \$	en e
59. Part 5: Total business-related property, line 45	To the second se
60. Part 6: Total farm- and fishing-related property, line 52	· ·
61. Part 7: Total other property not listed, line 54 +\$	
62. Total personal property. Add lines 56 through 61	otal → +s7,900
63. Total of all property on Schedule A/B. Add line 55 + line 62	\$7,900

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Fill in this information to ic	lentify your case:			**************************************		
Debtor 1 Sylvalia	And	Castillo Last Name			,	
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name				
United States Bankruptcy Court	for the: Northern District of I	llinois	, this contracts the same of t			
Case number(If known)			•			Check if the amended

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

P	art4: Identify the Property You Claim	as Exempt	
1.	Which set of exemptions are you claiming? ☐ You are claiming state and federal nonban ☐ You are claiming federal exemptions. 11 L	kruptcy exemptions. 11 L	
2.	For any property you list on Schedule A/B t	hat you cláim as exemp	t, fill in the information below.
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.
	Brief description:	\$	<u></u>
	Line from Schedule A/B:		any applicable statutory limit
	Brief description:	\$	<u> </u>
	Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit
	Brief description:	\$	<u> </u>
	Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3		filed on or after the date of adjustment.)
	□ No		Odf. Jour before you filed this case?
	Yes. Did you acquire the property covered No	by the exemption within i	,215 days before you filed this case?
	☐ Yes ·		

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		Document	Page 24 01 64	•	
1	1	Cocking			

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption
	Brief description:	\$	\$ 100% of fair market value, up to
	Line from Schedule A/B:		any applicable statutory limit
	Brief description:	\$	□ \$ □ 100% of fair market value, up to
	Line from Schedule A/B: ———	·	any applicable statutory limit
-	Brief description:	\$	
	Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit
	Brief description:	\$	 \$
٠	Line fromSchedule A/B:	·	100% of fair market value, up to any applicable statutory limit
	Brief description:	\$	□ \$
	Line from		100% of fair market value, up to any applicable statutory limit
	Brief description:	\$	 •
	Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit
	Brief description:	\$	D \$
	Line from Schedule A/B:	A SALAR CARRENT PROPERTY AND A SALAR CARRENT	100% of fair market value, up to any applicable statutory limit
	Brief description:	\$	\$
	Line from Schedule A/B:		any applicable statutory limit
	Brief description:	\$	□ \$
	Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit
	Brief description:	\$.
	Line from Schedule A/B:	-	100% of fair market value, up to any applicable statutory limit
	Brief description:	\$	
	Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit
	Brief description:	\$	□ \$
	Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit

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• .		
Fill in this information to identify your cas	e:	
Debtor 1 Sandra A	nn Castillo	
First Name Middle I	Samo Erst Name	
Debtor 2 (Spouse, if filing) First Name Middle !	Same Last Name	
United States Bankruptcy Court for the: Northern	District of Illinois	
Case number(if known)		☐ Check if this is an
(II NIOTE)		amended filing
Official Form 106D		•
	s Who Have Claims Secur	ed by Property 12/15
information. If more space is needed, cop additional pages, write your name and case	If two married people are filing together, both are e y the Additional Page, fill it out, number the entries, se number (if known).	and attach it to this form. On the top of any
Do any creditors have claims secured be	y your property?	
No. Check this box and submit this for	n to the court with your other schedules. You have noth	ing else to report on this form.
Yes. Fill in all of the information below.		
Part 1: List All Secured Claims		
2. List all secured claims. If a creditor has n	nore than one secured claim, list the creditor separately	Column A Column B Column C Amount of claim Value of collateral Unsecured
for each claim. If more than one creditor h	as a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Do not deduct the that supports this portion value of collateral claim If any
2.1	Describe the property that secures the claim:	\$\$
Creditor's Name .		
Number Street		
	As of the date you file, the claim is: Check all that apply Contingent	
City State ZiP Code	Unliquidated	
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.	
Debtor 1 only	An agreement you made (such as mortgage or secured)	•
Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Judgment lien from a lawsuit	
☐ Check if this claim relates to a	Other (including a right to offset)	-
community debt	1 - A 4 - 32-36 4	
Date debt was incurred	Last 4 digits of account number. Describe the property that secures the claim:	\$ \$ \$
Creditor's Name]
Number Street		
	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated	
City State ZIP Code	☐ Disputed	
Who owes the debt? Check one.	Nature of Iien. Check all that apply.	
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or secured car loan)	
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)	
At least one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)	
Check if this claim relates to a community debt	, and finding a right a droop	. , .
Date debt was incurred	Last 4 digits of account number	

Add the dollar value of your entries in Column A on this page. Write that number here:

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Debtor 1 First Name Middle Name	Case nu	mber (# known)		7 - 75 - 1
Additional Page Part 1: After listing any entries on this by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A: Amount of claim Do not deduct the value of collateral	Column B Value of collater that supports the claim	
	Describe the property that secures the claim:	\$	· \$	\$\$
Creditor's Name		٦.		
Number Street			•	
		₫.		•
City State ZIP Code	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed	•		
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	_		
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	\$	s	s
Creditor's Name	Describe the property trac sections and claim.	7	. •	_* <u></u>
Number Street			•	
City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Officer (including a right to offset)			
community debt Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	s	**************************************	¢
Creditor's Name Number Street	Second the property that secures the status.			
City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.		•	
Debtor 1 only	An agreement you made (such as mortgage or secured		•	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	,		***************************************
☐ Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number			,
Add the dollar value of your entries	in Column A on this page. Write that number here:	2		
	add the dollar value totals from all pages.	\$\$		

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	, i	Α				
			and the continues			
Debtor 1		4 / TTXTX		Case number	(if known)	
**	First Name Middle	e Name Last Na	une			

Part-2:	List Others to Be	Notified for a Debt	That You Airead	y Listed
agency is vou have	frying to collect from vi	ou for a debt you owe to for any of the debts that	someone else, list t you listed in Part 1,	r a debt that you already listed in Part 1. For example, if a collection he creditor in Part 1, and then list the collection agency here. Similarly, if list the additional creditors here, if you do not have additional persons to
				On which line in Part 1 did you enter the creditor?
Name			·	Last 4 digits of account number
Numbe	er Street	,		- .
				·
		·		
City		State	ZIP Code	
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
				_
Numbe	er Street			•
<u></u>				· · ·
				<u>-</u>
City		State	ZIP Code	
			,	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
				nna
Numbe	r Street			
Citý		State	ZIP Code	· ·
- Cxy				
				On which line in Part 1 did you enter the creditor?
Name		•		Last 4 digits of account number
Numbe	r Street			-

City		State ·	ZIP Code	-
		*		On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
114,110			,	
Number	r Street			-
				
City	,	State	ZìP Code	
			-	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
		•		
Number	Street			-
				-
		·····		_
City		State	ZIP Code	

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				•
Fi	In this information to identify your case:			
De	btor 1 Starme Middle Name	Last Name		
	btor 2	Last Name		
	and the state of t			. •
•	ited States Bankruptcy Court for the: Northern District of			Check if this is an
	se number known)		•	amended filing
∩f	ficial Form 106E/F			
	hedule E/F: Creditors W	ho Have Unsecured Cl	laims	12/15
List A/B. cred	is complete and accurate as possible. Use Part the other party to any executory contracts or use Property (Official Form 106A/B) and on Schedi litors with partially secured claims that are listed ded, copy the Part you need, fill it out, number to additional pages, write your name and case numbers.	nexpired leases that could result in a claim. A ule G: Executory Contracts and Unexpired Le d in Schedule D: Creditors Who Have Claims he entries in the boxes on the left. Attach the	Also list executory to lases (Official Form Secured by Propert	106G). Do not include any fy. If more space is
Pa	11. List All of Your PRIORITY Unsecure	ed Claims		
.	Do any creditors have priority unsecured claims No. Go to Part 2.			
. 1	List all of your priority unsecured claims. If a cneach claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the cursecured claims, fill out the Continuation Page of (For an explanation of each type of claim, see the in	a claim has both priority and nonpriority amounts claims in alphabetical order according to the cred Part 1. If more than one creditor holds a particula	s, list that claim here a litor's name. If you ha ar claim, list the other	ive more than two priority creditors in Part 3.
1.1		Last 4 digits of account number		amount amount \$
	Priority Creditor's Name	, -		
	Number Street	When was the debt incurred?		
		As of the date you file, the claim is: Check all the	nat apply.	
	City State ZIP Code	Contingent Unliquidated		
	Who incurred the debt? Check one.	☐ Disputed		
	Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:	•	•
	Debtor 1 and Debtor 2 only	☐ Domestic support obligations	•	
	At least one of the debtors and another Check if this claim is for a community debt	Taxes and certain other debts you owe the gove Claims for death or personal injury while you we		
	Is the claim subject to offset?	intoxicated Other, Specify		
	□ No □ Yes	U Other, Specify		
2		Last 4 digits of account number	\$	s s
	Priority Creditor's Name	When was the debt incurred?		
	Number Street	As of the date you file, the claim is: Check all the	nat apply.	
		Contingent		
	City State ZIP Code	Unliquidated Disputed		
٠	Who incurred the debt? Check one. Debtor 1 only	Type of PRIORITY unsecured claim:		
	Debtor 2 only	Domestic support obligations		
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the gove	emment	
	At least one of the debtors and another Check if this claim is for a community debt	Claims for death or personal injury while you we		
	is the claim subject to offset?	intoxicated Other. Specify	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

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Case number (# known)

Case number (# known)

Your PRIORITY Unsecured Claim	ns Continuation Page	Halle Land Control of	The Control of the second	CHAPAGE TO CONTROL
er listing any entries on this page, number the	m beginning with 2.3, followed by 2.4, and so forth.	-Total claim	Priority amount	Nonpriorit amount
Priority Creditor's Name	Last 4 digits of account number	\$	\$	_ \$
CHOING CIRCIDIA CALIB	When was the debt incurred?			
Number Street	•			
	As of the date you file, the claim is: Check all that apply.	•		
	Confingent			
City State ZIP Code	Unliquidated Disputed	•		
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support abligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
Check if this claim is for a community debt	☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify	٠		,
Is the claim subject to offset?				
□ No	•		•	•
Q Yes		2000 CHA WATER COLUMN ASSESSMEN		
	Last 4 digits of account number	\$	_ \$	\$
Priority Creditor's Name				
Number Street	When was the debt incurred?		٠	
	As of the date you file, the claim is: Check all that apply.		,	
	☐ Contingent			
City State ZIP Code	Unliquidated	•		
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	· ·			
Debtor 1 and Debtor 2 only	Domestic support obligations Taxes and certain other debts you owe the government			
At least one of the debtors and another	☐ Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify			
ls the claim subject to offset?				
□ No	•			
Yes	**************************************		**************************************	······································
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	When was the debt incurred?			
Number Street	when was the dept incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Confingent		٠,	
City . State ZIP Code	☐ Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
D Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligations Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other. Specify			
s the claim subject to offset?	•	•		
□ No		•		
☐ Yes				

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Debtor 1

Case number (# kr

List All of Your NONPRIORITY Unsecured Claims Part 2: 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim Last 4 digits of account number 🗸 When was the debt incurred? As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another ☐ Student loans Obligations arising out of a separation agreement or divorce ☐ Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify ___ O No ☐ Yes Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify __ ☐ No Yes 000 Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only ☐ Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts □ No Other, Specify ☐ Yes

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Case number (if known)_

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	r listing any entries on this page, number them beginning with 4.4	, followed by 4.5, and so forth.	Total claim
\overline{I}		449.71	
10	One Main + mancial	Last 4 digits of account number $\underline{U} \stackrel{\square}{=} \underbrace{\&} \underline{U}$	s 4.54
	Nonpriority Creditor's Name 4311 E Lincoln Way	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
	Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	□ No	Other. Specify	
	☐ Yes		
		LL4 Q - TL construction of the construction of	1879/4 2 (8,~700/2846)-60-0088888800000
ځ	RRCA	Last 4 digits of account number 0480	2770
	Nonpriority Creditor's Name	<u> a প্ৰা</u>	4
	201E 3rd St	When was the debt incurred?	
	Number Street Sterling II 61081	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	Unliquidated Disputed	
	Debtor 1 only		
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a community debt	you did not report as priority claims	
	s the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
	□ No		
	Yes	449-71	
3 6			./n aa
	Delect to player Credit Union Nonpriority Creditor's Name	Last 4 digits of account number $\frac{\mathcal{O}}{2} \frac{48}{1.27}$	V
,	PO ROX 636	When was the debt incurred?	
į	Number Street	As of the date you file, the claim is: Check all that apply.	
ī	City State ZIP Code	Contingent	
,	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	s the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	No	Other. Specify	
(Yes		

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4	i.4, followed by 4.5, and so forth.	Total claim
RUCKTUT Spine Center Nonpriority Creditor's Name PO BOX 4533 Number Street Carol Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes	Last 4 digits of account number	<u>\$3,315</u>
Nonpriority Creditor's Name CT85 Weaver Rd Suite Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number	\$ <u>935</u>
Nonpriority Creditor's Name Street City State S	Last 4 digits of account number	\$1130

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| Debtor 1 | Page 33 of 64 | Case number (# known) |

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	r listing any entries on this page, number them beginning with 4.4	, followed by 4.5, and so forth.	Total claim
1.10	CGH Medical Center	Last 4 digits of account number 5241	s <u>5108</u>
	PO BOX 739	When was the debt incurred?	
	Number Street (c1)(c5)	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	 Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify 	
Ш	Sauk Valley Physical Therapy	Last 4 digits of account number \bot \frown \frown	* <u>430</u>
i	Nonpriority Creditor's Name 4204 E Lincolnway Ave Suite D	When was the debt incurred?	
i	number Street	As of the date you file, the claim is: Check all that apply.	
· ·	St Cliving 1 (c) (08) City State ZIP Code	Contingent	
,	Who incurred the debt? Check one.	☐ Unliquidated	
	Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Student loans	
		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	s the claim subject to offset? ☐ No	Other. Specify	
	Yes		
<u>.</u>	makeum managapa ing kananan managam managa managam managam man	Last 4 digits of account number $\frac{7}{2}$	\$ <u>32</u> 2
į.	Jonpriority Creditor's Name 415 10 Cust Street Suite A	When was the debt incurred?	
N	lumber Street	As of the date you file, the claim is: Check all that apply.	
ā	State ZIP Code	☐ Contingent	
v	Who incurred the debt? Check one.	☐ Unliquidated	
	Debtor 1 only	☐ Disputed	
C	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debter 1 and Debter 2 only	☐ Student loans	
		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	1
	s the claim subject to offset? No Yes	Other. Specify	
		A A MANAGEMENT AND A STATE OF THE ANGLE AND A	

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Debtor 1

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Case number (if known)_

Your NONPRIORITY Unsecured Claims - Continuation Page

Nonpriority Creditor's Name	Last 4 digits of account number $\mathcal{Q}\mathcal{Q}\mathcal{\Delta}\mathcal{C}$	<u> </u>
Department 4635	When was the debt incurred?	
COSO SECONO TI LONGO	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans	
	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
□ No □ Yes		
\$U// ANSIGN TO THE CONTROL OF THE CO		NESZERIA KANTONISKA KARINISKA KONTONISKA SIJA
Nonpriority Creditor's Name	Last 4 digits of account number	\$
Number of the state of the stat	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZiP Code	☐ Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other Specify	
□ No	Other Specify	
Yes		
and the second s	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unfiquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student joans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
ls the claim subject to offset?	 □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify 	
□ No □ Yes	_ 3.00. 590017	

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Debtor 1

Sandra	Ann	C_{Ω}	<11	1
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47 - 4 b l		Mamaa		

Case number (#known)_____

Par	Your NONPRIORITY Unsecured Claims — Continua	tion Page	
Afte	r listing any entries on this page, number them beginning with 4	.4, followed by 4.5, and so forth.	:laim
]		Last 4 digits of account number \$	
	Nonpriority Creditor's Name	When was the debt incurred?	
•	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
	□ No □ Yes		
ſ.]		Last 4 digits of account number\$	
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
•	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority daims	
	Check if this claim is for a community debt Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
	☐ No		
\prod_{i}		Last 4 digits of account number	
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
•	At least one of the debtors and another Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
	□ No □ Yes		

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Debtor 1

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mondo	400	(()
	1 1 1 1 1	<u> </u>
bust tele \ very v alletistelles felore	man and the last Name	

Case number (# known)____

example, if a collection a	gency is trying to collect from	out your bankruptcy, for a debt that you already listed in Parts 1 or 2. For a you for a debt you owe to someone else, list the original creditor in Parts 1 or have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the tersons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
•		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	•	Part 2: Creditors with Nonpriority Unsecured Clair
	La Caracteria de la Car	Last 4 digits of account number
City	State ZIP Cod	<u> </u>
		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
		name
City	State ZIP Code	Last 4 digits of account number
		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		
Number Street	,	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		☐ Part 2: Creditors with Nonpriority Unsecured Claims
City	State ZIP Code	Last 4 digits of account number
		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	· · · · · · · · · · · · · · · · · · ·	Part 2: Creditors with Nonpriority Unsecured
		Claims
_		Last 4 digits of account number
City	State ZIP Code	
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
Martia		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
		Claims
	State ZIP Code	Last 4 digits of account number
City	Jage ZF Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
		_
City	State ZIP Code	Last 4 digits of account number
Name ,		
Number Street	* ************************************	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Part 2: Creditors with Nonpriority Unsecured Claims
•		-
City	State ZIP Code	Last 4 digits of account number

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Desc Main

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Castillo

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SERVICE YO	00260	1000	
202			ı
34 J.			1
237. 75		DK.E.	1

Add the d	mounts for each type of unsecured claim.	mation i	
	• .		Total claim
al claims	6a. Domestic support obligations	6a.	\$
m Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$
	6c. Claims for death or personal injury while you were intoxicated	6c.	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$
-			
	6e. Total. Add lines 6a through 6d.	6e.	\$
			Total claim
al claims	6f. Student loans	6f.	\$
n Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ s
	6j, Total. Add lines 6f through 6i.	6 j.	

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Fi	l in this in	formation to id	dentify your	case:							
De	btor	Sandr	C4	<u>Ann</u>	Casti	110		-			
	btor 2	First Name		ddie Name	Last Name		-				
	ouse If filing)	First Name Bankruptcy Court		idde Name om District of II	Lest Name linnis						
	se number	Bankrupicy Court	IOI tile. NOI til	BILL DISGISE OF III	W1010	-			ra <i>(</i>	Check if this	. i
	known)									mended fili	
•		٠.								•	
		orm 106						_			
					ntracts an					12 <i>l1</i>	15
info	rmation, I	te and accurat f more space is ges, write your	s needed, co	opy the additio	ed people are filing anal page, fill it out, f known).	together, i number th	ooth are equally e entries, and a	responsible ttach it to this	for supplying page. On the	top of any	
. 1	Do you h	iave any execu	itory contrac	cts or unexpire	ed leases?						
	№ No. C	heck this box a	nd file this fo	m with the cou	rt with your other sch contracts or leases	edules. Yo	u have nothing e n <i>Schedule A/B</i> :	lse to report or Property (Office	n this form. ial Form 106A	'В).	
۵.		talu saab na	rean at com	Inany with wh	om you have the cor	ntract or le	ase. Then state	what each co	ntract or leas	e is for (for	
	example unexpired	, rent, vehicle l	ease, cell pl	hone). See the	instructions for this fo	orm in the i	nstruction bookle	t for more exa	nples of execu	tory contract	s and
. ,		· .					State what the	contract or la	seo le for		.,
	Person o	or company wif	h whom you	ı nave the con	tract or lease		State What the	COMME	ase is ioi		
2.1											
	Name										÷
	Number	Street	-							•	٠,
	City		State	ZIP Code	- The second		-				
2.2										-	
	Name							٠.,			
	Number	Street									
2.3	City	- Providence (September 1997)	State	ZIP Code							
2.3	Name	* · · · · · · · · · · · · · · · · · · ·			-		•				
	Number	Street									
	City	·	State	ZIP Code							. 1.
2.4	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************		CLESCO CONTRACTOR CONT	,	-					
	Name		-			•••••					
	Number	Street				_					,
	City		State	ZIP Code					·		
2.5				44				•			;
	Name					_	•		•		•.
	Number .	Street									
	City		State	ZIP Code		_					

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Debt		Sour	xha=	Ann-	Cas	+410-		Case ni	imber (if kno	wn)					
		Fret Name	Middle Name	Last Name											
		Additiona	I Page if You	Have More	Contracts	or Leases									4.5
•	Person	or compan	y with whom y	ou have the c	ontract or le	ease		What the	contract	or lease	s for	independent Franksis			
2.2				•			•					•			
	Name		<u>.</u>				-								:
	Number	Street		<u> </u>			-			٠	٠				
	City		Sta	te ZIP Code			-		-		*************		**********	20 00 - 1000 - 1000	:
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	Name			-									•		- ;
	Number	Street			· ·										
	City		Sta	te ZIP Code						, 					
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	Name														-
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	City		. Sta	te ZIP Code			_							···	
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	Name														
	Number	Street					•••	•			.*				
	City	·	Sta	te ZIP Code											
2			rykering problem in Sec . 10. — Leep segment of the Control			·									
	Name		·												•
	Number	Street				-	-								4
	City	4	Sta	te ZIP Code							-				
2		***************************************					_								* 1
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	Number	r Street					- .								
	City	-	Sta	te ZIP Code			_				·				
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-	Name		.:												
	Number	Street				•	_								:
	City		Sta	te ZIP Code									MOKALT-FUX		
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ļ ļ	Name					·									
	Number	Street	-	,											
	. City		Sta	te ZIP Code	-					•		-			

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Fill in this information to identify your cas	e: 		
Debtor 1 Sanda A	too Cast	110	·
First Name Middle N	ame Last Name		
Debtor 2 (Spouse, If filing) First Name Middle N	lame Last Name		
United States Bankruptcy Court for the: Northern	District of Illinois		
Case number			
(If known)			Check if this is an
			amended filing
Official Form 106H			
Schedule H: Your Cod	ebtors		12/15
			d accurate as possible. If two married people
re filing together, both are equally responsed number the entries in the boxes on the case number (if known). Answer every ques	sible for supplying correct in left. Attach the Additional Pa stion.	ge to this page. On the top	needed, copy the Additional Page, fill it out, of any Additional Pages, write your name and
Do you have any codebtors? (If you are No	ming a joint case, do not use er	Tier-shouse as a codeptor.)	
O Yes			
2. Within the last 8 years, have you lived i	in a community property stat	e or territory? (Community p	roperty states and territories include
Arizona, California, Idaho, Louisiana, Nev	rada, New Mexico, Puerto Rico	, Texas, Washington, and Wi	sconsin.)
No. Go to line 3.			
Yes. Did your spouse, former spouse,	, or legal equivalent live with yo	ou at the time?	
. O No		Fill in the name	and current address of that person
Yes. In which community state or	territory did you live?	- Lin it die tiente	S ASIA OUT ON A BOARD OF THE POSTONIA
Name of your spouse, former spouse, or leg	jal equivalent		
. Number Street			
. Millipel Graec			
City	State	ZIP Code	
 In Column 1, list all of your codebtors. shown in line 2 again as a codebtor on Schedule D (Official Form 106D), Sche Schedule E/F, or Schedule G to fill out 	lly if that person is a guarant dule E/F (Official Form 106E/	or or cosigner. Make sure y F), or <i>Schedul</i> e G (Official F	ou have listed the creditor on
Column 1: Your codebtor			
		Check	all schedules that apply:
5.1		🔲 Sci	nedule D, line
Name		·. 🚨 Sc	nedule E/F, line
Number Street		□ Sc	nedule G, line
City	State	ZIP Code	
.2			
Name			nedule D, line
			nedule E/F, line
Number Street		_ Sc	nedule G, line
City	. State	ZIP Coda	
3.3	•	D'sd	nedule D, line
Name			nedule E/F, line
Number Street			nedule G, line
-	Cheke	7/P Coria	1
		AND LIBROR	

page 1 of ____

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 ebtor		St Name Middle Name	Last Name	<u>astilio- == (</u>	Case number (#known)
	Ad	ditional Page to List	More Codebtors		
	Column 1:	Your codebtor			Column 2: The creditor to whom you owe the debt
·					Check all schedules that apply:
					Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street		,	Schedule G, line
					_
	City		State	ZIP Code	
_					_ Schedule D, line
	Name				☐ Schedule E/F, line
	Númber	Street			- Schedule G, line
	Number	Stedt			•
	City		State	ZiP Code	
_					Schedule D, line
ا	Name				☐ Schedule E/F, line
•					Schedule G, line
	Number	Street	,		
•	City		State	ZIP Code	
T					
	Name				Schedule D, line
•	Name	•			☐ Schedule E/F, line
	Number	Street			Schedule G, line
					•
_	City		State	· ZIP Code	
_					Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street			Schedule G, line
	,,,,,,,,,,		•		
	City		State	ZIP Code	
.].					Schedule D, line
	Name			•	☐ Schedule E/F, line
		Ot -1			─ ☐ Schedule G, line
	Number	Street			•
	City		State	ZIP Code	
Ī		•			D Schedule D, line
	Name				☐ Schedule E/F, line
					Schedule G. line
	Number	Street	•		
	City:		State	ZIP Code	
J	City		- Comp	•	
	Name			- Autority Town	Schedule D, line
	,				Schedule E/F, line
	Number	Street .			Schedule G, line

State

ZIP Code

Fill in this information to identify	y your case: -	A 1980 - 1982				
Debtor 1 Sandra	Ann Co	astillo		٠		
First Name Debtor 2	Middle Name	Last Name				
(Spouse, if filing) First Name	Middle Name	- Last Name				•
United States Bankruptcy Court for the	Northern District of Illinois			01 1 15		
Case number(If known)		•		Check if t	nis is: nended filing	
		***************************************		🔲 A sup	plement showing pos ie as of the following	tpetition chapter 13 date:
Official Form 106I				MM / I	DD / YYYY	•
Schedule I: You	ur Income					12/15
Be as complete and accurate as p supplying correct information. If y if you are separated and your separate sheet to this form. On the Part 1: Describe Employs	you are married and not fi use is not filing with you se top of any additional pa	iling jointly, and yo do not include inf	ur spouse is formation ab	out vour spo	you, include illiorilladi ouse. If more space is	needed, attach a
Fill in your employment information.		Debtor 1			Debtor 2 or non-	iling spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employed	ed		☐ Employed ☐ Not employed	
Include part-time, seasonal, or self-employed work.	Occupation	Gener	al L	il bore		
Occupation may include student or homemaker, if it applies.	Employer's name	Wahil	Clip.	Der Co	ΓP	
	Emblokei s ugue		. #	f	· \	-
• • • •	Employer's address	Number Street	<u>/, (_()</u> (<u>Cust</u>	Number Street	1
		sterli	09			
			, l		•	
,		Sterlin	GT	6 DS Code	City	State ZIP Code
,	How long employed th	ere? <u>5 yrs</u>	-			100000000000000000000000000000000000000
Part 2: Give Fetails Abou	nt Monthly Income	,				
Estimate monthly income as o spouse unless you are separate		rm. If you have nothi	ing to report t	for any line, w	rite \$0 in the space. Inc	lude your non-filing
If you or your non-filing spouse to below. If you need more space,	nave more than one employ attach a separate sheet to	er, combine the info this form.	ormation for a	il employers	for that person on the lir	es
			Fo	r Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sa deductions). If not paid monthly	tlary, and commissions (by, calculate what the month)	pefore all payroll by wage would be.	2. \$1	216	\$	er e
3. Estimate and list monthly over	ertime pay.		3. +\$	<u>D</u>	+ \$	
4. Calculate gross income. Add	line 2 + line 3.	•	4. \$	all6,	\$	

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		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4 .	<u>s1,216</u>	\$
ist all payroll deductions:		,	
·	5a.	* (*)	\$
5a. Tax, Medicare, and Social Security deductions	5b.	* (7)	\$
5b. Mandatory contributions for retirement plans	5c.	• r)	\$
5c. Voluntary contributions for retirement plans	5d.	• ()	\$
5d. Required repayments of retirement fund loans	5u. 5e.	• ()	•
5e. Insurance	5f.	*	\$
5f. Domestic support obligations		• ()	•
5g. Union dues	5g.	3	<u> </u>
5h. Other deductions. Specify:	5h.	+\$_ <u>U</u>	+ \$
Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$	\$
Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 36	\$
List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm			
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	s	\$
8b. Interest and dividends	8b.	\$ <u> </u>	\$
8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive	ent		
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$ <u>0</u>	\$
8d. Unemployment compensation	8d.	· \$	\$
8e. Social Security	8e.	\$	\$
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		· 7) ·	
Specify:	8f.	3 /	•
8g. Pension or retirement income	8g.	\$_ <u>U</u>	\$
8h. Other monthly income. Specify:	8h.	+\$	+\$
Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$ 0	\$
Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10	\$ 1,36	+ \$ 0 = \$ 1.31
State all other regular contributions to the expenses that you list in Schericude contributions from an unmarried partner, members of your household, friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are Specify:	your o	dependents, your roo vailable to pay exper	•
Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain S	resu Statisi	It is the combined mo tical Information, if it a	applies 12. \$\frac{1}{2} \text{Combined monthly income.}

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Fill in this information to identify your case:			
Debtor 1 Sandra Ann Castille	Check if this is:		
First Name Middle Name Last Name Debtor 2	An amended fill	ina	
(Spouse, If filing) First Name Middle Name Last Name	A supplement s	howing post	
United States Bankruptcy Court for the: Northern District of Illinois	expenses as of	the following	date:
Case number (If known)	MM / DD / YYYY		
	-		
Official Form 106J	•		
Schedule J: Your Expenses			12/15
Be as complete and accurate as possible. If two married people are filing together, bot information. If more space is needed, attach another sheet to this form. On the top of a (if known). Answer every question.	h are equally responsit my additional pages, w	ole for supplyi rite your name	ng correct e and case number
Par VID Describe Your Household			
1. Is this,a joint case?			
No. Go to line 2. Yes, Does Debtor 2 live in a separate household?			
□ No			
Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Househo	old of Debtor 2.	· · · · · · · · · · · · · · · · · · ·	
2. Do you have dependents?	ationship to	Dependents	Does dependent live
Do not list Debtor 1 and Debtor 2. Debtor 1 or Debtor 2. Debtor 2. Debtor 2. Debtor 2. Debtor 3 or Debtor 4 or Debtor 4 or Debtor 5 or Debtor 5 or Debtor 6 or Debtor 1 or Debtor 2 or Debtor 2 or Debtor 1 or Debtor 1 or Debtor 2 or Debtor 1 or Debtor 2 or Debtor 1 or Debtor 2 or Debtor 1 or Debtor 2 or Debtor 3 or Debtor 2 or Debtor 3 or Deb		ige	with you?
Do not state the dependents'	<u> </u>	17	□ No □ Yes
names.		15	□ No
			☐ Yes
		-	☐ No ☐ Yes
	e.		□ No
			Yes
	****		□ No □ Yes
3. Do your expenses include expenses of people other than yourself and your dependents? Yes		•	
yourself and your dependents? — Yes		<u> </u>	
Part 2: Estimate Your Ongoing Monthly Expenses			
Estimate your expenses as of your bankruptcy filing date unless you are using this for expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> applicable date.			
Include expenses paid for with non-cash government assistance if you know the value	of .		in the second se
such assistance and have included it on Schedule I: Your Income (Official Form 106L)	·	Your exper	ises'
 The rental or home ownership expenses for your residence. Include first mortgage parany rent for the ground or lot. 	yments and 4	\$ 600	<u>5</u>
If not included in line 4:		· F1	•
4a. Real estate taxes	4a.	\$ 0 e ?)	
4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses	4b. . 4c.	•	
Home maintenance, repair, and upkeep expenses Homeowner's association or condominium dues	. 4c.		

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ebtor 1 2andra Ano Castillo	Case number (# known)		
First Name Middle Name Last Name			
			Your expenses
Additional mortgage payments for your residence, such as home equity loans		5.	: 685
Utilities:			as artis.
6a. Electricity, heat, natural gas		6a.	<u> 50</u>
sb. Water, sewer, garbage collection		6b.	<u>s</u>
6c. Telephone, cell phone, internet, satellite, and cable services		6c.	s <u>100</u>
6d. Other Specify:		6d.	s
Food and housekeeping supplies		7.	<u>s 350</u>
Childcare and children's education costs		8.	s
Clothing, laundry, and dry cleaning		9.	s50
Personal care products and services	,	10.	\$ 35
Medical and dental expenses		11.	sO
Transportation. Include gas, maintenance, bus or train fare.		40	s
Do not include car payments.		12.	. 0
Entertainment, clubs, recreation, newspapers, magazines, and books		13.	• 0
Charitable contributions and religious donations		14.	•
Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	•	15a.	s
15b. Health insurance		15b.	\$
15c. Vehicle insurance	•	15c.	\$
15d. Other insurance. Specify:	•	15d.	<u>\$</u>
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:		16.	s <u> </u>
Installment or lease payments:			
17a. Car payments for Vehicle 1		17a.	<u>\$</u>
17b. Car payments for Vehicle 2	-	17b.	\$
17c. Other, Specify:		17c.	<u>s , Q</u>
17d. Other, Specify:		17d.	· s
Your payments of alimony, maintenance, and support that you did not report your pay on line 5, Schedule I, Your Income (Official Form 106i).	as deducted from	18.	s C
Other payments you make to support others who do not live with you.	•		
Specify:		19.	sO
Other real property expenses not included in lines 4 or 5 of this form or on So	chedule I: Your Income.	,	
20a. Mortgages on other property		20a.	\$
20b. Real estate taxes	•	20b.	<u>5</u>
20c. Property, homeowner's, or renter's insurance		20c.	<u>s</u> D ··
20d. Maintenance, repair, and upkeep expenses		20d.	s
And the second s	•	200	. ()

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Debtor 1 Sandra Am Castillo Case number	(f known)
. Other. Specify:	21. +\$
Calculate your monthly expenses.	
22a. Add lines 4 through 21.	22a. \$ \\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22ь. \$
22c. Add line 22a and 22b. The result is your monthly expenses.	22c \$ \\ 80

. Calculate your monthly net income.	1 211-
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ 1.5010
23b. Copy your monthly expenses from line 22c above.	23b\$
23c. Subtract your monthly expenses from your monthly income.	_{236.} s 36
The result is your monthly net income.	230.
Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	
No.	
Yes. Explain here:	

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Debtor 1 Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the: N Case number (If known)	Middle Name Last Name		ended filing ernent showing poor es as of the following	stpetition chapter 13 ng date:
Official Form 106J-2 Schedule J-2: Example 10 Property 10 Propert	xpenses for Sepa	rate Household	of Debtor	2 12/15
Use this form for Debtor 2's separate Debtor 2 have one or more depende only with respect to expenses for Deneeded, attach another sheet to this question. Part 1: Describe Your House	nts in common, list the dependent ebtor 2 that are not reported on Sc form. On the top of any additional	s on both Schedule J and this f hedule J. Be as complete and a	form. Answer the quecurate as possible	uestions on this form e. If more space is
1. Do you and Debtor 1 maintain sep	arate households?		_	
No. Do not complete this form Yes	1.			•
Do you have dependents? Do not list Debtor 1 but list all	No Yes. Fill out this information for	Dependent's relationship to Debtor 2:	Dependent's age	Does dependent live with you?
other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J.	each dependent	errophys, inches of polyments and a finite state of the s		☐ No ☐ Yes
Do not state the dependents' names.				☐ No ☐ Yes
				☐ No ☐ Yes
		·	derrorsen vita Pala Pala vita vita vita de deservita de la composición dela composición de la composición dela composición de la composici	☐ No ☐ Yes
		·		□ No □ Yes
AYDARGE AT RANDIA OTRETTRAD	□ No □ Yes			
Part 2: Estimate Your Ongoin	g Monthly Expenses		Þ	The state of the s
Estimate your expenses as of your beexpenses as of a date after the banks	•	re using this form as a supplem	nent in a Chapter 13	case to report
Include expenses paid for with non-c such assistance and have included it			Your exp	enses
The rental or home ownership expany rent for the ground or lot.	penses for your residence. Include	first mortgage payments and	4. \$	
If not included in line 4:			_	· ;
4a. Real estate taxes	, , , , , , , , , , , , , , , , , , ,		4a. \$	
4b. Property, homeowner's, or ren4c. Home maintenance, repair, an			4b. \$ 4c. \$	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Home maintenance, repair, an Homeowner's association or co			4c. 3 4d. \$	
	en e	استمعم الوالديوالغم وهوا البوام مرام وواج المدار	*	wrong die

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		4			The second secon	
. Debtor 1	First Name	Middle Name	Anna Last Name	Castillo	Case number (#known)	·

			Your expenses
		5.	\$
5.	Additional mortgage payments for your residence, such as home equity loans	a.	
6.	Utilities:		•
•	6a. Electricity, heat, natural gas	6a.	\$
	бь. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
•	ed. Other. Specify:	6d,	\$
7.	Food and housekeeping supplies	7.	\$
8.	Childcare and children's education costs	8.	\$
9,	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	\$
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$
4.5	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
13.	Charitable contributions and religious donations	14.	\$
14.			***************************************
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15 d .	\$
	The state of the s		
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
		•	•
17.	Installment or lease payments:		•
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$
· ·	Other payments you make to support others who do not live with you.		•
ij.		19.	\$
	Specify:		-
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom-		. `
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

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Other. Specify:			21.	+\$
Your monthly expense The result is the montitotal expenses for Deb	es. Add lines 5 through 2 by expenses of Debtor 2. or 1 and Debtor 2.	21. Copy the result to line 22b of Sc	hedule J to calculate the 22.	\$
ine not used on this fo	m.		•	
	•			
Do you expect an inc	ease or decrease in you	ır expenses within the year afte	er you file this form?	
	most to finish naving for V	our car loan within the year or do	you expect your	
For example, do Volt e	crease or decrease beca	use of a modification to the terms	s of your mortgage?	
For example, do Volt e	crease or decrease beca	nuse of a modification to the term	s of your mortgage?	

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			·
in this information to identify your case:			
bors Sandra Ann	Castille		
First Name Middle Name	Last Name		
ISE, if filing) First Name Middle Name .	Last Name		•
d States Bankruptcy Court for the: Northern District of II	linois		
own)			Check if this
			amended filir
fficial Form 106Dec			•
eclaration About an l	Individual I	Debtor's Schedules	12/1
wo married people are filing together, both are e			•
Sign Below		511 and handsunder forms?	-
Did you pay or agree to pay someone who is NO	of an attorney to neip y	ou in our pankruptcy to me?	
Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Deck	aration, and
<u>.</u>	•	Signature (Official Form 119).	
•	•		
• .			
Under penalty of perjury, I declare that I have re that they are true and correct.	ad the summary and sc	hedules filed with this declaration and	
and any die trae and correct		•	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1	·	
<u> Xandra U. Castil</u>	<u> </u>		
	Signature of Debt		

Date MM / DD / YYYY

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Fill in this information to identify your case:		=	•	
This information of the holy your cases	<u> </u>			
Debtor 1 Sandra Ann	OS+1110		-	
First Name Middle Name	Last Name		•	
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name			
United States Bankruptcy Court for the: Northern District of	Illinois	-		
	•			
Case number (If known)			•	Check if this is an
				amended filing
				•
Official Form 107		•		
Statement of Financial Affai	re for Indiv	iduals Filing	for Bankrupto	V 04/16
Be as complete and accurate as possible. If two mar information. If more space is needed, attach a separ	ried people are filing	g together, both are equa	ally responsible for suppl	ying correct
number (if known). Answer every question.	ate sheet to this for	in. On the top of any aud	ittoriai pages, write your	name and case
	-	•		
Part 1: Give Details About Your Marital Sta	itus and Where Y	ou Lived Before		
	,			
1. What is your current marital status?				
; it make to your outlone make a state of	•			
Married				
☑ Not married				
	,	•		
2. During the last 3 years, have you lived anywhere	other than where y	ou live now?		
∑ No .		,		
☐ Yes. List all of the places you lived in the last 3	years. Do not include	e where you live now.	N.	
Debtor 1:	Dates Debtor 1	Debtor 2:		Dates Debtor 2
	lived there	· · · · · · · · · · · · · · · · · · ·		lived there
		· ·		.
		Same as Debtor 1		Same as Debtor 1
. 144-186	From			From
Number Street	To	Number Street		***************************************
<u>.</u>				Τn
		•		То
-	_	•	-	То
City State ZIP Code	_	City	State ZIP Code	To
City State ZIP Code		City	State ZIP Code	
City State ZIP Code	_	City Same as Debtor 1	State ZIP Code	Same as Debtor 1
City State ZIP Code	- Erom		State ZIP Code	Same as Debtor 1
City State ZIP Code Number Street	- - . From		State ZIP Code	Same as Debtor 1
	- - - - - - - - - - - - - - - - - - -	☐ Same as Debtor 1	State ZIP Code	Same as Debtor 1
		☐ Same as Debtor 1	State ZIP Code	Same as Debtor 1
Number Street		Same as Debtor 1 Number Street		Same as Debtor 1
		☐ Same as Debtor 1	State ZIP Code State ZIP Code	Same as Debtor 1
Number Street City State ZIP Code	To	Same as Debtor 1 Number Street City	State ZIP Code	Same as Debtor 1 From To
Number Street	To	Same as Debtor 1 Number Street City	State ZIP Code	Same as Debtor 1 From To (Community property
Number Street City State ZIP Code 3. Within the last 8 years, did you ever live with a s	To	Same as Debtor 1 Number Street City	State ZIP Code	Same as Debtor 1 From To (Community property
Number Street City State ZIP Code 3. Within the last 8 years, did you ever live with a s states and territories include Arizona, California, Ida	To - pouse or legal equiv ho, Louisiana, Nevac	Same as Debtor 1 Number Street City valent in a community prota, New Mexico, Puerto Ri	State ZIP Code	Same as Debtor 1 From To (Community property
Number Street City State ZIP Code 3. Within the last 8 years, did you ever live with a s states and territories include Arizona, California, Ida	To - pouse or legal equiv ho, Louisiana, Nevac	Same as Debtor 1 Number Street City valent in a community prota, New Mexico, Puerto Ri	State ZIP Code	Same as Debtor 1 From To (Community property

Part 2: Explain the Sources of Your Income

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Position 1 Sources of income Check all that apply. (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Operating a business For last calendar year: (January 1 to December 31,	Did you have any income from employme Fill in the total amount of income you receive If you are filing a joint case and you have inc	ed from all jobs and all bus	inesses, including part-ti	ime activities.	ndar years?
Check all that apply. Chec	☑ No ☐ Yes Fill in the details				•
Sources of Income Check all that apply. Sources of Income Check all that apply. (before deductions and coxtusions) For last calendar year: (January 1 to December 31,	ros. i m ni are dottalio.				
Check all that apply.		Debtor 1		Debtor Z	
bonuses, tips Operating a business Operating a busi			(before deductions and		(before deductions ar
For last calendar year: (January 1 to December 31,		bonuses, tips	\$ <u> </u>	bonuses, tips	<u>\$O</u>
For the calendar year before that: (January 1 to December 31, YYYY) Operating a business Operating a busines	For last calendar year:	☐ Wages, commissions,	. 0	☐ Wages, commissions,	• ()
(January 1 to December 31,	(January 1 to December 31,	, , , , , , , , , , , , , , , , , , , ,	3		φ
Operating a business	For the calendar year before that:				()
reclude income regardless of whether that income is taxable. Examples of other income are alimony; child support, Social Security, nemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and ambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. It is each source and the gross income from each source separately. Do not include income that you listed in line 4. No I Yes. Fill in the details. Debtor 2	41 8 1 84	· •	\$ 🗸	-	\$ <u> </u>
Sources of Income Describe below. Sources of Income Describe below. Gross income from each source (before deductions and exclusions)	id you receive any other income during to clude income regardless of whether that in temployment, and other public benefit pays	this year or the two previ come is taxable. Examples nents; pensions; rental inco	of other income are aling ome; interest; dividends;	nony; child support; Social S ; money collected from laws	uits; royalties; and
Describe below. Descri	vid you receive any other income during to include income regardless of whether that in nemployment, and other public benefit pays ambling and lottery winnings. If you are filling ist each source and the gross income from	this year or the two previous come is taxable. Examples nents; pensions; rental incig a joint case and you have each source separately. De	of other income are alinome; interest; dividends; e income that you receiv	mony; child support; Social S ; money collected from laws red together, list it only once at you listed in line 4.	uits; royalties; and
the date you filed for bankruptcy: \$	vid you receive any other income during to include income regardless of whether that in nemployment, and other public benefit pays ambling and lottery winnings. If you are filling ist each source and the gross income from	this year or the two previous is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Debtor 1	s of other income are alinome; interest; dividends; e income that you receive on the income that	mony; child support; Social S; money collected from laws red together, list it only once at you listed in line 4.	uits; royalties; and under Debtor 1.
the date you filed for bankruptcy: \$	id you receive any other income during to clude income regardless of whether that in memployment, and other public benefit pays ambling and lottery winnings. If you are filling the first each source and the gross income from	this year or the two previous come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Debtor 1	s of other income are alir ome; interest; dividends; e income that you receiv o not include income that Gross income from each source (before deductions, and	mony; child support; Social S; money collected from laws yed together, list it only once at you listed in line 4. Debtor 2	uits; royalties; and under Debtor 1. Gross income from each source (before deductions and
S	id you receive any other income during to clude income regardless of whether that in nemployment, and other public benefit pays ambling and lottery winnings. If you are filling the source and the gross income from	this year or the two previous come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Debtor 1	s of other income are alir ome; interest; dividends; e income that you receiv o not include income that Gross income from each source (before deductions, and	mony; child support; Social S; money collected from laws yed together, list it only once at you listed in line 4. Debtor 2	uits; royalties; and under Debtor 1. Gross income from each source (before deductions and
(January 1 to December 31,)	id you receive any other income during a clude income regardless of whether that in nemployment, and other public benefit pays ambling and lottery winnings. If you are filln st each source and the gross income from I No I Yes. Fill in the details. From January 1 of current year until	this year or the two previous come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Debtor 1	s of other income are alir ome; interest; dividends; e income that you receiv o not include income that Gross income from each source (before deductions, and	mony; child support; Social S; money collected from laws yed together, list it only once at you listed in line 4. Debtor 2	uits; royalties; and under Debtor 1. Gross income from each source (before deductions and
(January 1 to December 31,) \$\$	id you receive any other income during a clude income regardless of whether that in nemployment, and other public benefit pays ambling and lottery winnings. If you are filling at each source and the gross income from No. Yes. Fill in the details. From January 1 of current year until	this year or the two previous come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Debtor 1	s of other income are alir ome; interest; dividends; e income that you receiv o not include income that Gross income from each source (before deductions, and	mony; child support; Social S; money collected from laws yed together, list it only once at you listed in line 4. Debtor 2	uits; royalties; and under Debtor 1. Gross income from each source (before deductions and
(January 1 to December 31,)	pid you receive any other income during to clude income regardless of whether that in nemployment, and other public benefit pays ambling and lottery winnings. If you are fill ist each source and the gross income from 1 No 1 Yes. Fill in the details.	this year or the two previous come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Debtor 1	s of other income are alir ome; interest; dividends; e income that you receiv o not include income that Gross income from each source (before deductions, and	mony; child support; Social S; money collected from laws yed together, list it only once at you listed in line 4. Debtor 2	uits; royalties; and under Debtor 1. Gross income from each source (before deductions and
	id you receive any other income during to clude income regardless of whether that in memployment, and other public benefit pays ambling and lottery winnings. If you are filling st each source and the gross income from No Yes. Fill in the defails. From January 1 of current year until the date you filed for bankruptcy:	this year or the two previous come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Debtor 1	s of other income are alir ome; interest; dividends; e income that you receiv o not include income that Gross income from each source (before deductions, and	mony; child support; Social S; money collected from laws yed together, list it only once at you listed in line 4. Debtor 2	uits; royalties; and under Debtor 1. Gross income from each source (before deductions and
	Did you receive any other income during include income regardless of whether that in unemployment, and other public benefit paying gambling and lottery winnings. If you are filling that each source and the gross income from No No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31,)	this year or the two previous come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Debtor 1	s of other income are alir ome; interest; dividends; e income that you receiv o not include income that Gross income from each source (before deductions, and	mony; child support; Social S; money collected from laws yed together, list it only once at you listed in line 4. Debtor 2	uits; royalties; and under Debtor 1. Gross income from each source (before deductions and

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r 1	st Name Middle Na	anse —	Last Name	<u>asti</u>	110	Case	edmun e	er (if known)		
rt 3: Lis	st Certain Payn	nents You	ı Made Befo	re You Filed	for Bank	cruptcy .				
Are either l	Debtor 1's or Det	otor 2's deb	ots primarily c	onsumer debt	s?				•	
□ No. Ne	either Debtor 1 ne nourred by an indiv	or Debtor 2 vidual prima:	has primarily	consumer de	bts. Cons ousehold	umer debts a purpose."	are def	ined in 11	U.S.C. § 101	(8) as
Di	uring the 90 days t	before you f	iled for bankru	ptcy, did you pa	ay any cre	ditor a total o	of \$6,4	25" or mor	e?	
	No. Go to line 7.									
Ŋ	Yes. List below of total amour child suppo	nt you paid t	hat creditor. De	paid a total of o not include payn ot include payn	ayments fo	or domestic s	suppor	t obligation	ns, such as	
* 5	Subject to adjustm	•	-							
J Yes, D∈	ebtor i or Debtor	2 or both h	nave primarily	consumer de	bts.					
4.6	uring the 90 days b		•			fitor a total o	ıf \$600	or more?		
Q	No. Go to line 7:									
П			r to whom you	asid a total of	¢enn ar m	nen and tha t	tatal ar	mount vou	paid that	
, Lud	Yes. List below e creditor. Do alimony. Als	not include	payments for	domestic supp ts to an attome	ort obligati	ions, such as	s child			
				Dates of payment	Total an	ount paid		Amount you	ı stili owe	Was this payment for.
· .				1	Total an	nount paid		Amount you	ı still owe	
:	Creditor's Name		·	1	Total an	nount paid	\$_	Amount you	ı still owe	☐ Mortgage
:			·	1	Total an	pount paid	\$_	Amount you	ı still owe	☐ Mortgage
÷	Creditor's Name Number Street		·	1	Total arr	nount paid	\$_	Amount you	ı still owe	☐ Mortgage ☐ Car ☐ Credit card
:			· · · · · · · · · · · · · · · · · · ·	1	Total arr	pount paid	\$\$	Amount you	still owe	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment
÷	Number Street		·	1	Total arr	Dount paid	\$_	Amount you	stil owe	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or yendor
:		State	ZIP Code	1	Total arr	oount paid	\$_	Amount you	still owe	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment
	Number Street	State	ZIP Code	1	Total arr	O O	\$\$. \$\$	Amount you	stil owe	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor ☐ Other
	Number Street	State	ZIP Code	1	Total arr	O O	\$\$\$\$\$\$	Amount you	stil owe	Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage
	Number Street City Creditor's Name	State	ZIP Code	1	Total arr	C)	\$\$_ \$\$	Amount you	stil owe	Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car
	Number Street	State	ZIP Code	1	**************************************	Dount paid	\$\$_	Amount you	stil owe	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor ☐ Other ☐ Mortgage ☐ Car ☐ Credit card
	Number Street City Creditor's Name	State	ZIP Code	1	Total arr	C)	\$\$_ \$\$	Amount you	still owe	Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment
	Number Street City Creditor's Name Number Street			1	**Total and *** ***	C)	\$\$_ \$_	Amount you	stil owe	Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment
	Number Street City Creditor's Name	State	ZIP Code	1	Total arr	C)	\$\$_	Amount you	still owe	Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor
	Number Street City Creditor's Name Number Street			1	Total arr	O	\$	0	stil owe	Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor
	Number Street City Creditor's Name Number Street			1	\$\$	O O	\$\$_	C)	still owe	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor ☐ Other ☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor ☐ Other ☐ Other ☐ Mortgage
	Number Street City Creditor's Name Number Street			1	\$\$	O	\$\$\$\$\$\$	0	still owe	Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Country Mortgage Car Country Mortgage Car Country Mortgage Car
	Number Street City Creditor's Name Number Street			1	\$\$	O O	\$\$_	0	still owe	Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Credit card Loan repayment Mortgage Car Cother Cother Cother Cother Cother Cother Cother
	Number Street City Creditor's Name Number Street City Creditor's Name			1	\$\$	C)	\$\$\$\$\$\$	0	stil owe	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor ☐ Other ☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor ☐ Other ☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor ☐ Other ☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment
	Number Street City Creditor's Name Number Street City Creditor's Name			1	Total arr	O	\$\$\$\$\$\$	0	still owe	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor ☐ Other ☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor ☐ Other ☐ Mortgage ☐ Car ☐ Credit card

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Within 1 year before you filed for bankruinsiders include your relatives; any general corporations of which you are an officer, diagent, including one for a business you operated as child support and alimony.	partners; relatives of any rector, person in control, o	general partners; por owner of 20% or	partnerships of whic more of their voting	h you are a general partner; securities; and any managing
☑ Yes. List all payments to an insider.	Dates of payment	Total amount	Amount you still owe	Reason for this payment
Insider's Name		\$	\$	
Number Street				
City State Z	P Code			4.5.00
Insider's Name	-	\$		
Number Street				
				,
City State Zi	P Code			
ithin 1 year before you filed for bankrup i insider? clude payments on debts guaranteed or c	otcy, did you make any posigned by an insider.	payments or transi	fer any property or	account of a debt that benefited
thin 1 year before you filed for bankrup insider? clude payments on debts guaranteed or c No	otcy, did you make any posigned by an insider.	payments or transi Total amount paid	fer any property of Amount you still owe	
thin 1 year before you filed for bankrup insider? clude payments on debts guaranteed or c No	otcy, did you make any posigned by an insider. insider. Dates of	Total amount	Amount you still	Reason for this payment
thin 1 year before you filed for bankrup insider? clude payments on debts guaranteed or c No Yes. List all payments that benefited an	otcy, did you make any posigned by an insider. insider. Dates of	Total amount	Amount you still owe	Reason for this payment
thin 1 year before you filed for bankrup insider? clude payments on debts guaranteed or continuous No Yes. List all payments that benefited an insider's Name	otcy, did you make any posigned by an insider. insider. Dates of	Total amount	Amount you still owe	Reason for this payment

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or 1 Say 1 Marie Middle Nem	A \(\lambda \)	Castilla	Case number (# known)	to territorio del compressione e e e e e e e e e e e e e e e e e e
· .		•		•
		ns, and Foreclosures	suit, court action, or administrative pa	oceeding?
List all such matters, including and contract disputes.	personal injury cases	, small claims actions, div	orces, collection suits, paternity actions,	support or custody modificati
No Yes, Fill in the details.				
	Natu	re of the case	Court or agency	Status of the case
Case title			Court Name	Pending On appeal
Case number			Number Street	Concluded .
	- ,		City State ZIP Code	
Case title			Court Name	Pending On appeal
Case number			Number Street City State ZIP Code	Concluded
No. Go to line 11. Yes. Fill in the information t	pelow.	Describe the property	Date	Value of the property
		_		s ()
Creditor's Name				
Number Street		Explain what happened Property was rep		
	0.4. 70.0.	Property was form Property was gar Property was atta		
City	State ZIP Code	Describe the property		Value of the property
,		_		<u> </u>
Creditor's Name Number Street		Explain what happened		
	-	Property was rep	ossessed.	·
City	State ZIP Code	Property was gan		

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1 First Name Middle Name Last	name Castillo	Case number (#known)_		
Within 00 days before one Stad for howless	inter all any evolutor including a	hank or financial inclifu	tion set off am a	maunts from vaur
Vithin 90 days before you filed for bankru ccounts or refuse to make a payment bec	ptcy, did any creditor, including a cause you owed a debt?	Dank of Hildlicial Hisucu	Libii, Set Oir any a	nouncs from your
No		,		
Yes. Fill in the details.			 	
	Describe the action the creditor too	k .	Date action was taken	Amount
Creditor's Name				
Number Street	-			\$
. WILLIAM SHEET				
	-			•
City State ZIP Code	Last 4 digits of account number: X	(XXX	•	
	Last a digital of gooders for the trans-		2	
ithin 1 year before you filed for bankrupt	cy, was any of your property in the	possession of an assig	gnee for the benef	it of
editors, a court-appointed receiver, a cu	stodian, or another official?	•		
No				
Yes			•	
5: List Certain Gifts and Contribu	ıtions	-		
ithin 2 years before you filed for bankrup No I Yes. Fill in the details for each gift.	etcy, did you give any gifts with a to	otal value of more than \$	\$600 per person?	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	otcy, did you give any gifts with a to Describe the gifts	otal value of more than \$	Dates you gave	Value
No Yes. Fill in the details for each gift.		otal value of more than t		Value
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600		otal value of more than \$	Dates you gave	Value S
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600		otal value of more than t	Dates you gave	Value \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		otal value of more than \$	Dates you gave	Value \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		otal value of more than t	Dates you gave	Value \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		otal value of more than \$	Dates you gave	Value \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street		otal value of more than t	Dates you gave	Value \$ ()
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift		otal value of more than \$	Dates you gave	Value \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street		otal value of more than t	Dates you gave	Value \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you	Describe the gifts	otal value of more than \$	Dates you gave the gifts	\$ <u>0</u> \$ <u>0</u>
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whorn You Gave the Gift Number Street City State ZIP Code		otal value of more than	Dates you gave	Value \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$500	Describe the gifts	otal value of more than \$	Dates you gave the gifts Dates you gave	\$ <u>0</u> \$ <u>0</u>
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$500	Describe the gifts	otal value of more than	Dates you gave the gifts Dates you gave	\$ <u>0</u> \$ <u>0</u>
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$500 per person	Describe the gifts	otal value of more than \$	Dates you gave the gifts Dates you gave	\$ <u>0</u> \$ <u>0</u>
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$500 per person	Describe the gifts	otal value of more than \$	Dates you gave the gifts Dates you gave	\$ <u>0</u> \$ <u>0</u>
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$500 per person	Describe the gifts	otal value of more than	Dates you gave the gifts Dates you gave	\$ <u>0</u> \$ <u>0</u>
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$500 per person	Describe the gifts	otal value of more than \$	Dates you gave the gifts Dates you gave	\$ <u>0</u> \$ <u>0</u>
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$500 per person Person to Whom You Gave the Gift	Describe the gifts	otal value of more than \$	Dates you gave the gifts Dates you gave	\$ <u>0</u> \$ <u>0</u>

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1 SOLICIA A	a castillo	Case number (if known)	
LROTIARURE WILDER VALUE TOS	as Sauguste	·	
ithin 2 years before you filed for bankru No Yes. Fill in the details for each gift or cor	•	outions with a total value	of more than \$600 to any charity?
Gifts or contributions to charities that total more than \$600	Describe what you contributed		Date you Value contributed
			\$
Charity's Name .		nin mary record	Territoria, maioritoria de la composición dela composición de la composición de la composición dela composición de la composición de la composición de la composición de la composición dela composición de la composición de la composición dela composición de la composición de la composición dela composición de la composición dela composición dela composi
•	-	The state of the s	<u> </u>
Number Street	•		
sampanod On out			
City State · ZiP Code	-	3	
•		•	
6: List Certain Losses	•	•	
saster, or gambling? No I Yes. Fill in the details.			
ithin 1 year before you filed for bankrup saster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred	tcy or since you filed for bankruptcy. Describe any insurance coverage for the line amount that insurance has pectains on line 33 of Schedule A/B: Prope	the loss	Date of your Value of property lost
No I Yes. Fill in the details. Describe the property you lost and	Describe any insurance coverage for include the amount that insurance has p	the loss	Date of your Value of property
No Yes. Fill in the details. Describe the property you lost and	Describe any insurance coverage for include the amount that insurance has p	the loss	Date of your Value of property
No Yes. Fill in the details. Describe the property you lost and how the loss occurred	Describe any insurance coverage for the include the amount that insurance has pectains on line 33 of Schedule A/B: Prope	the loss	Date of your Value of property
No I Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Tran	Describe any insurance coverage for the include the amount that insurance has pectalins on line 33 of Schedule A/B: Property in the insurance has pectalins on line 33 of Schedule A/B: Property in the insurance has pectaline and insurance has pectaline an	the loss aid. List pending insurance	Date of your Value of property lost S
No Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Transithin 1 year before you filed for bankrupty of consulted about seeking bankruptcy of the loss occurred.	Describe any insurance coverage for include the amount that insurance has p claims on line 33 of Schedule A/B: Propersion of the control of t	the loss aid. List pending insurance orty. your behalf pay or transf	Date of your Value of property lost S
No I Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Transithin 1 year before you filed for bankrupt or consulted about seeking bankruptcy clude any attorneys, bankruptcy petition presents.	Describe any insurance coverage for include the amount that insurance has p claims on line 33 of Schedule A/B: Propersion of the second	the loss aid. List pending insurance orty. your behalf pay or transf	Date of your Value of property lost S S S S S S S S S S S S S S S S S S S
No I Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Transithin 1 year before you filed for bankrupt or consulted about seeking bankruptcy clude any attorneys, bankruptcy petition presents.	Describe any insurance coverage for Include the amount that insurance has proclaims on line 33 of Schedule A/B: Property o	the loss aid. List pending insurance only. your behalf pay or transfor services required in your	Date of your Value of property lost \$ er any property to anyone bankruptcy.
No I Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Transithin 1 year before you filed for bankrupt au consulted about seeking bankruptcy oclude any attorneys, bankruptcy petition pre	Describe any insurance coverage for include the amount that insurance has postalins on line 33 of Schedule A/B: Property in the second of the	transferred	Pate of your Value of property lost lost \$ \$ er any property to anyone bankruptcy. Date payment or Amount of payment ransfer was
No I Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Transithin 1 year before you filed for bankrupt au consulted about seeking bankruptcy oclude any attorneys, bankruptcy petition pre	Describe any insurance coverage for include the amount that insurance has proclaims on line 33 of Schedule A/B: Property is fers tcy, did you or anyone else acting on or preparing a bankruptcy petition? eparers, or credit counseling agencies for Description and value of any property	transferred	Pate of your Value of property lost lost \$ er any property to anyone bankruptcy. Pate payment or Amount of payment
No Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Transithin 1 year before you filed for bankrupty occurred about seeking bankruptcy occurred any attorneys, bankruptcy petition previous. No Yes. Fill in the details.	Describe any insurance coverage for include the amount that insurance has postalins on line 33 of Schedule A/B: Property in the second of the	transferred	Pate of your Value of property lost lost \$ \$ er any property to anyone bankruptcy. Date payment or Amount of payment ransfer was
No I Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Transithin 1 year before you filed for bankruptu consulted about seeking bankruptcy clude any attorneys, bankruptcy petition pre No Yes. Fill in the details. Person Who Was Paid	Describe any insurance coverage for include the amount that insurance has postalins on line 33 of Schedule A/B: Property in the second of the	transferred	Pate of your Value of property lost lost \$ \$ er any property to anyone bankruptcy. Date payment or Amount of payment ransfer was
No I Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Transithin 1 year before you filed for bankruptou consulted about seeking bankruptcy clude any attorneys, bankruptcy petition present No Yes. Fill in the details. Person Who Was Paid Number Street	Describe any insurance coverage for include the amount that insurance has postalins on line 33 of Schedule A/B: Property in the second of the	transferred	Pate of your Value of property lost \$ er any property to anyone bankruptcy. Date payment or Amount of payment ransfer was
No Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Transithin 1 year before you filed for bankruptu consulted about seeking bankruptcy clude any attorneys, bankruptcy petition pre No Yes. Fill in the details. Person Who Was Paid	Describe any insurance coverage for include the amount that insurance has postalins on line 33 of Schedule A/B: Property in the second of the	transferred	Pate of your Value of property lost lost \$ \$ er any property to anyone bankruptcy. Date payment or Amount of payment ransfer was

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	First Name Middle Name Last	Name	Case number (# known)	· · · · · · · · · · · · · · · · · · ·	*****
	-				
		Description and value of any property	ransferred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid	The state of the s			<u> </u>
	Number Street				s ()
				 •	<u> </u>
	City State ZIP Code				•
	Email or website address	-			
	Person Who Made the Payment, if Not You				
9 /	not include any payment or transfer that yo No Yes. Fill in the details.	ou listed on line 16.		•	
٠		Description and value of any property t	ransferred	Date payment or transfer was	Amount of payme
	Person Who Was Paid			made	
	Number Street			****	\$
	(AURIDE) Silver				_
•	City State ZIP Code			and an in the distribution of the state of t	\$ <u> </u>
tran Inclu Dor ☑ I	City State ZIP Code nin 2 years before you filed for bankrup isferred in the ordinary course of your l ide both outright transfers and transfers in outriclude gifts and transfers that you have	business or financial affairs? nade as security (such as the granting o	interest or ma	ortgage on your pro	perty).
tran Inclu Dor ☑ I	City State ZIP Code nin 2 years before you filed for bankrup usferred in the ordinary course of your l ude both outright transfers and transfers in out-include gifts and transfers that you have	business or financial affairs? nade as security (such as the granting o		ortgage on your pro	Date transfer was made
tran Inclu Dor	City State ZIP Code nin 2 years before you filed for bankrup usferred in the ordinary course of your l ude both outright transfers and transfers in out-include gifts and transfers that you have	business or financial affairs? nade as security (such as the granting of the decire o	f a security interest or ma	ortgage on your pro	perty). Date transfer
tran Inclu Dor	City State ZIP Code nin 2 years before you filed for bankrup usferred in the ordinary course of your I ude both outright transfers and transfers in not include gifts and transfers that you hav No Yes. Fill in the details.	business or financial affairs? nade as security (such as the granting of the decire o	f a security interest or ma	ortgage on your pro	Date transfer was made
tran Inclu Dor	City State ZIP Code nin 2 years before you filed for bankrup isferred in the ordinary course of your i ude both outright transfers and transfers in not include gifts and transfers that you hav No Yes. Fill in the details. Person Who Received Transfer	business or financial affairs? nade as security (such as the granting of the decire o	f a security interest or ma	ortgage on your pro	Date transfer was made
tran Inclu Dor	City State ZIP Code nin 2 years before you filed for bankrup isferred in the ordinary course of your l ide both outright transfers and transfers in not include gifts and transfers that you hav No Yes. Fill in the details. Person Who Received Transfer Number Street	business or financial affairs? nade as security (such as the granting of the decire o	f a security interest or ma	ortgage on your pro	Date transfer was made
tran Inclu Dor	City State ZIP Code nin 2 years before you filed for bankrup asferred in the ordinary course of your l ude both outright transfers and transfers in not include gifts and transfers that you hav No Yes. Fill in the details. Person Who Received Transfer Number Street	business or financial affairs? nade as security (such as the granting of the decire o	f a security interest or ma	ortgage on your pro	Date transfer was made
tran Inclu Do r	City State ZIP Code nin 2 years before you filed for bankrup isferred in the ordinary course of your i ude both outright transfers and transfers in not include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you	business or financial affairs? nade as security (such as the granting of the decire o	f a security interest or ma	ortgage on your pro	Date transfer was made

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		Operation		
ebtor 1	First Name Middle Name L	nn CUSTIIC ast Name	Case number (# know	m)
g. Wif	hin 10 years before you filed for bank	ruptcy, did you transfer any proper	ty to a self-settled trust	t or similar device of which you
are	a beneficiary? (These are often called	asset-protection devices.)	•	·
⊠ ′	No	•	•	
	Yes. Fill in the details.			
				SOLENNING CONTRACTOR
		Description and value of the prope	erty transferred	Date transfer was made
	Name of trust		·	•
			,	***
· · · · ·				
art t	List Certain Financial Accour	its, Instruments, Safe Deposit	Boxes, and Storage	Units
o, Wit	hin 1 year before you filed for bankru	ptcy, were any financial accounts (or instruments held in y	our name, or for your benefit,
clo	sed, sold, moved, or transferred?	•		
	lude checking, savings, money marke			res in banks, credit unions,
	kerage houses, pension funds, coop	eratives, associations, and other fi	nancial institutions.	
Ø				
u	Yes. Fill in the details.			and the second of the second o
		Last 4 digits of account number	Type of account or instrument	Date account was Last balance before closed, sold, moved, closing or transfer
		•	than others.	or transferred
				\sim
	Name of Financial institution	XXXX	Checking	<u> </u>
	Number Street		☐ Savings	
•	number Sueec .		☐ Money market	
		•	☐ Brokerage	
	City State ZIP Code	num	Other	
•			- Oulei	
	•		T	. 0
	Name of Financial institution	_ XXXX	Checking	•
	· .		☐ Savings	
	Number Street	.	Money market	
	•	_ <i>,</i>	☐ Brokerage	
		_	Other	
	City State ZIP Code			
i. Do j	you now have, or did you have within	1 year before you filed for bankrup	tcy, any safe deposit b	ox or other depository for
	urities, cash, or other valuables?	, .		
				•
L.I	Yes. Fill in the details.			
	. •	Who else had access to it?	Describe the	contents Do you still have it?
				☐ No ☐ Yes
	Name of Financial Institution	Name ·		u les
	Number Street	···	<u></u>	war in the second of the secon
	Number Street	Number Street		X
		Cities Danies 1999 Andre		
•		City State ZIP Code		• •

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tor 1 SOUND A	Last Name COSTILO	Case number (# known)	
			•
Haye you stored property in a stora No	ge unit or place other than your home v	within 1 year before you filed for bankrup	itcy?
Yes. Fill in the details.			
	Who else has or had access to it	? Describe the contents	Do you stil
			have it?
.	a silke som		□ No
Name of Storage Facility	Name		☐ Yes
Number Street	Number Street		İ
Manned Steer		•	
	City State ZIP Code		
City State ZIP	Code	•	
handstade tinner in a grown and state in the service of the servic	· Any responses to property the state abbusiness and make and the present between the state and the distance the district and	Standard Mary Esperant of a sold of an exemplated of the engineer may be represented and appropriate and a paid	The second secon
rt 9: Identify Property You	Hold or Control for Someone Else	•	
			
	y that someone else owns? Include any	property you borrowed from, are storing	g for,
or hold in trust for someone. No		·	
Yes. Fill in the details.			
	Where is the property?,	Describe the property	Value
,	saulete ia me bioberrà t'	Describe the property	Value
O d - N	•		1.0
Owner's Name	·		\$ <u>U</u>
Number Street	Number Street		
•		-	
	City State	ZIP Code	
City State ZIP	Code State	In code	
1310: Give Details About En	vironmental Information	•	•
4			
the purpose of Part 10, the following	- · · ·		_
		concerning pollution, contamination, rek surface water, groundwater, or other me	
	ontrolling the cleanup of these substance		
Site means any location, facility, or	property as defined under any environ	mental law, whether you now own, opera	ite. or
ıtilize it or used to own, operate, or			,
lazardous material means anything	an environmental law defines as a haz	zardous waste, hazardous substance, to:	xíc .
substance, hazardous material, pol	lutant, contaminant, or similar term.		
ort all notices, releases, and proce	edings that you know about, regardles:	s of when they occurred.	
		•	
las any governmental unit notified	you that you may be liable or potentially	y liable under or in violation of an enviro	nmental law?
9 No			•
Yes, Fill in the details.			
	Governmental unit	Environmental law, if you know it	D-4
	Go Tenninghan unit	Environmental law, if you know it	Date of notice
		ļ	
		_1	į
Name of site	Governmental unit		

Name of site Number Street	Governmental unit		
***************************************		_	

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-1 SOM	An Castillo	Case number (# known)		
Liter Mame Minne Manie	Frapt lagning		•	
			•	
lave you notified any governmental	unit of any release of hazardous mater	al?		
No No	•		,	
Yes. Fill in the details.		Parada and the second s	Lings Control of the	
	Governmental unit	Environmental law, if you kn	ow it Date of n	once
	·			
Name of site	Governmental unit	1		
Number Street	Number Street			
	•			
	City State ZIP Code	•		
OL. TRE				
City State ZIP C	900		"Terminal laboration and a children and a children and a children and the college of the college and a children	
ave you been a party in any judicia	l or administrative proceeding under an	y environmental law? Inclu	de settlements and orders.	
No .				
Yes. Fill in the details.				
	Court or agency	Nature of the case	Status o	fthe
Case title				
Oase nur	Court Name		D Pent	ling
	·		Опа	ppea
	Number Street		☐ Cond	lude
· ·	 			
Case number	City State ZIP Cod	ie		
Give Details About You	ur Business or Connections to Any	Buelman		
	ankruptcy, did you own a business or h		mections to any business?	
	loyed in a trade, profession, or other ac			
A member of a limited liability	y company (LLC) or limited liability part			
A partner in a partnership				·
An officer, director, or manag	•			
An owner of at least 5% of the	e voting or equity securities of a corpor	ation	•	
No. None of the above applies. G				
_				
Yes. Check all that apply above a	and fill in the details below for each bus			
Yes. Check all that apply above a		s Employe	r Identification number	TNI
Yes. Check all that apply above a	and fill in the details below for each bus	s Employe	ridentification number clude Social Security number or li	īN.
Business Name	and fill in the details below for each bus	s Employe Do not in		īN.
	Describe the nature of the busines	s Employe Do not in EIN:	clude Social Security number or fi	TN.
Business Name	and fill in the details below for each bus	s Employe Do not in EIN:	clude Social Security number or i	TN.
Business Name	Describe the nature of the busines	s Employer Do not in EIN:	clude Social Security number or fi	TN.
Business Name	Name of accountant or bookkeepe	s Employe Do not in EIN: r Dates bu From	clude Social Security number or li	TN.
Business Name Number Street	Describe the nature of the busines Name of accountant or bookkeepe	s Employee Do not in EIN: r Dates bu From s Employer	clude Social Security number or li	to the
Business Name Number Street	Name of accountant or bookkeepe	s Employee Do not in EIN: r Dates bu From s Employer	clude Social Security number or li	to the
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Fill in this in	főrmation to identify yo	ur case:		-	 	THE STATE OF THE S
Debtor 1	SQ YQ TQ First Name	Ann C	OSTILO Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States 6	Bankruptcy Court for the: No	orthern District of Illinois	·			<u>:</u>
Case number (if known)	•		·		. [Check if this is an amended filing
					•	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Credit information below.	iors Who Have Claims Secured by Property (Officia	l Form 106D), fill in the
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C7
	Creditor's name:	Surrender the property.	□ No
	Description of	Retain the property and redeem it.	Yes
	property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	,
		Retain the property and [explain]:	
	Creditor's	☐ Surrender the property.	O No
	name:	Retain the property and redeem it.	☐ Yes
•	Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	·	☐ Retain the property and [explain]:	
	Creditor's	☐ Surrender the property.	□ No
	name:	Retain the property and redeem it.	Yes
	Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
		Retain the property and [explain]:	
	Creditor's	☐ Surrender the property.	O No
	name:	Retain the property and redeem it.	☐ Yes
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| Lessor's name: Description of leased property: |
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